

Regional Emergency Medical
& Trauma Services
Systems Development Biennial Plan
Progress Report

Southeastern RETAC
Plan Cycle
July 1, 2009 – June 30, 2011



Plan Update:	5.3 Michael C. Merrill, SECRETAC Coordinator
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Please list any accomplishments in the area of EMTS in your region. Please list any partners on projects or accomplishments.

Goal # 1

EMTS System Component(s) Human Resources:

Objective/Description: #1. Identifying needs within the region. The State Wide Needs Assessment Project has been completed for our region. Please see attached SNAP SECRETAC Draft Report.

Objective/Description: #2. Trends are also identified in the SNAP report.

Goal # 1

EMTS System Component(s): Human Resources:

Objective/Description: Training and Education for the Region. By utilizing multiple funding resources, which is a identified objective in its own, we have provided multiple day (20 hrs. plus) courses over an average of two and half day courses; 1. TEEX, a nationally recognized EMS Management Program and Course provided collaboratively with EMSAC (which was a cost-savings due to their EMTS grant funded course) in December in La Junta at a low-cost site of Otero Jr. College. 2. By utilizing non-EMTS funds we were able to obtain funding for three (3) Farm Medic Courses, which have not been provided in over a decade in the region, in Lamar, La Junta and Springfield. Over 42 participants from across the region were provided a two and half day didactic and on-site applications program.

3. The RETAC has over the past four years as part of its fiscal resources program for long term sustainability, developed and provide courses with non-state, non-grant funding resources. SECRETAC provided at its own cost and resources for a "Trailblazer-EMS Billing" workshop in Lamar. Over thirty-five participants were provided the state of art from "Trailblazer's" own expert on "EMS Billing." Not only were SECRETAC's EMS agencies billing personnel offered the program, but, over half of the participants were from across the state, including as far as Grand Junction, Cortez and Denver.

Goal # 2

EMTS System Component(s): Fiscal Resources.

Objective/Description: SECRETAC has successfully obtained not only EMTS Provider Grants, first grant cycle of this year, all applications from Agencies were approved. Second grant cycle not published yet, but, all agencies who applied for financial waivers were successful. SECRTAC Council and staff provide technical assistance for agencies during grant writing processes. The state financial audit has been performed and the draft report is available. K Financials found no significant deficiencies and SECRTAC has already implemented the few recommendations for a even sounder financial system. See attached draft report, or within weeks the report when approved by council will be available on our web page.

Goal # 2***EMTS System Component(s): Fiscal Resources.***

Objective/Description: SECRETAC has just completed on the few "EMS Billing-Trailblazer's" workshops in the state. Thirty-five participants, many from across the state, were provided the state of the art of EMS billing from the nationally recognized, Ms. Gail Atnip, Trailblazers' EMS billing expert in Lamar, CO. SECRETAC billing personnel and ems managers attended and have rated the program as "excellent," and extremely valuable for our regions ems transport agencies and facilities.

Goal # 2***EMTS System Component(s): Fiscal Resources.***

Objective/Description: SECRETAC has once again (for the last two years) received approval for grant funds from CDPHE/HPP for regional training an education for all hazards programs (\$10,000 each for the last three years). The non EMTS funds help provide much need financial resources for the region.

Goal #2***EMTS System Component(s): Fiscal Resources.***

Objective/Description: SECRETAC, Inc., has acquired approved Training and Education funds (\$20,000) for FY2010-11 from the EMTS Account. SECRETAC board members, staff and agencies in the RETAC provided the support and assistance to make this one-year approved increase for our regional T & E needs.

NOTE: The SEMTAC review of the Biennial Plan 09-11 indicated that we may not be receiving input from "facilities" representation. Please note the makeup of our current Council (22% of the council) has included for several years; Mr. Warren Yule, Adm. Weisbrod Memorial Hospital, from Kiowa County, Ms. Cecelia Deen, RN, SEColorado Hospital, Baca County, Dr. Andrew Saueracker, M.D., Prowers Medical Center, Prowers County, and Ms. Barbara Martin who has represented both the ambulance service as well as the Bent County Nursing and Long Term Facility in Las Animas county. Also, please note we are one the very few RETACs that also have had at least two County Commissioners as Council members. As coordinator of the SECRETAC since July 2006 these have been active and supportive council members along with the EMS, Fire and Injury Prevention professionals who make up the county commissioners appointed SECRETAC Council members.

Section 3: Goals and Objectives (2009-2011)

EMTS System Component(s) MCI Plans.

Goal # 3

Objective/Description: SECRETAC has agreed with a memorandum of agreement (MOU) for the support and assistance to a SECRETAC Medical Reserve Corp (MRC) in our region. The Medical Reserve Corps, or MRC, is a national program that was launched in 2002 after President George W. Bush's call to action in his State of the Union Address. It is a partner program of Citizen Corps, the national network of volunteers dedicated to ensuring hometown security. Citizen Corps, the Corporation for National and Community Service and the Peace Corps all are part of the President's USA Freedom Corps, which promotes volunteerism and service throughout the nation.

Medical Reserve Corps volunteers support local public health initiatives as well as the goals of the U.S. Department of Health and Human Services' Healthy People 2010, while advancing the priorities of the U.S. Surgeon General:

- promoting disease prevention;
- improving health literacy;
- eliminating health disparities; and
- enhancing public health preparedness.

Medical Reserve Corps units are community-based, though under the leadership of the U.S. Surgeon General. The community units provide a means of organizing local volunteers who want to donate their time and expertise to promote healthy living throughout the year, and to prepare for and respond to emergencies. Medical Reserve Corps volunteers work in their own communities and others for both planned and emergency events. There are 717 units with 148,000 volunteers throughout the country.

The Medical Reserve Corps supplements existing local emergency and public health resources. MRC volunteers include medical and public health professionals such as physicians, nurses, pharmacists, dentists, veterinarians and epidemiologists. While the purpose of the MRC is to supplement existing local health care response systems, other community volunteers, such as interpreters, chaplains, office workers and legal advisors, fill vital support roles. Medical Reserve Corps units recruit both health professionals and other community members to round out each community unit.

Colorado has 19 Medical Reserve Corps units located throughout the state.

Each unit is different in the way they were created and in the way they serve their communities, depending on local needs. The SECRETAC MRC is unique in that it serves the six southeastern counties; Baca, Bent, Crowley, Kiowa, Otero and Prowers. Ms. Kris Stokke, is the SECRETAC MRC Coordinator, based out of Kiowa county, Eads, CO. She has successfully received national recognition and funding from the National Association of County and City Health Officials (NACCH) \$10,000 and also provides technical assistance and programs through the Colorado Dept. of Public Health & Environments, Medical Reserve Corp Program and the Colorado Rural Health Center (CRHC).

Estimated costs of T & E objective:

	Description: T&E for the Year	Value/Cost
Donated items (goods)	Equipment/Classrooms 16 days @ \$100/day	\$1600
In-Kind (services)	18 Council/4qtrs/\$21/member	\$1512
RETAC Staff	--	\$--
RETAC Operating	3,000/yr.	\$3000
Grant/Other Funds	Council@workshops:6X10days@8hrs@\$21/hr	\$10,080
	Total (Average In-Kind Per Year from Council)	\$16,192

Section 1: RETAC Update/Overview

Ongoing Planning Process: The SECRETAC Biennial Plan is a on-going document that identifies and tracks over, not just the current Biennial Period, but over all our goals and objectives for the region. You will notice that goals, objectives and time-lines have been indicated and identified when they were accomplished or will have been targeted to be accomplished or re-evaluated. This may lengthen the plan, but, it provides the legacy, history and both accomplishments and on-going assessments for the region.

Mission Statement

“ We, The Southeastern Colorado Regional Emergency Medical and Trauma Advisory Council (SECRETAC), strive to provide direction, education, and tools to enhance the Emergency Medical System and Trauma (EMST) networks within this region.”

Vision Statement

“ The leadership of the SECRETAC Council is to provide integration amongst the EMST systems and direction to streamline and enhance the trauma network from the first responder through the end facility for each customer that lives and travels through the Southeastern Colorado RETAC.”

Section Two: Purpose and Background

- A. *The following is an outline, which includes the General Location, Purpose, and Background of the Southeastern Colorado RETAC. *Documents and information can be reviewed on the SECRETAC.com web site.*

General Regional Description:

The Southeastern Colorado RETAC Region is located in the Southeastern plains of Colorado and is situated in the middle to lower half of the Arkansas Valley. This area ranges from grassland with prairies that complement the flat lands to small rolling hills that extend east the borders of Kansas. The Southern part of the region is landscaped with canyons; small mesas and rolling hills that extend south to the Oklahoma border.

This Region includes Baca, Bent, Crowley, Kiowa, Otero, and Prowers County. Specific description and demographics for these counties can be found in Section 3, which starts on Page 10.

Background:

The Southeastern Colorado RETAC was formed via the passage of Colorado SB 00-180 and clarified later with HB 02-1440. These two bills had set the funding and statutory foundation for the development of the regional and statewide RETAC system.

Prior to the statutory requirement in 2000, this region had an Area Trauma Advisory Council (ATAC) and Regional EMS Council that encompassed the same counties as the present RETAC. Beginning in 1995, these two Councils worked together to improve, coordinate, and develop the EMS and trauma capabilities within this Region.

With similar goals and the requirement to create a regional council, both memberships transitioned to form what is now the Southeastern Colorado Regional Emergency Medical & Trauma Advisory Council (S.E.C.R.E.T.A.C.)

The SECRETAC was established as a 501(C)(3) Not-for-Profit Organization. The ATAC sought legal advice to develop the Non-for-Profit status and the Article of Incorporation

that ended with the formal approval of the 501(C)(3) Not-for-Profit on Dec 2nd 1999. The following years were dedicated in building the Regional Council, development of the operational structure, hiring a Regional Coordinator, improving system integration, and meeting the requirements as set forth in SB 00-180 and by the CDPHE contract requirements.

This process has established a professional relationship between the 6 EMST systems, county governments, local agencies, facilities, and other related organizations, which strives to build an EMST system that meets the needs of all customers.

Purpose:

The SECRETAC Council mission is to coordinate the development of a regional EMST system by providing leadership through technical support, educational programs, and tools to enhance the Emergency Medical Trauma System network within the Southeastern Colorado RETAC.

SECRETAC will provide ongoing support to the agencies and facilities within this region by insuring representation to the State Emergency Medical Trauma Advisory Board (SEMTAC) and the Colorado Department of Health (CDPHE). This will increase the information pipeline for this region and provide a vital link to identify Regional needs to SEMTAC and CDPHE for the continued improvement of this EMST system.

B. Council Member Appointment Process and Organizational structure.

Council Membership Appointments:

Each Board of County Commissioners establishes the primary council by the appointment of 2 general members and 1 executive board member to represent their County EMST system on the SECRETAC Council.

Organizational Structure

Executive Board

The Executive Board is comprised of a Chairman, Vice- Chairman, Secretary, Treasurer, and Two-At-Large members that are nominated from the appointed executive members and elected by the vote of the full council.

The Executive Board operates under “Robert Rules of Order”. This provides an organized structure in meetings, leadership, and direction for all operational aspects of the SECRETAC Council and Mission. The Board also provides direction, supervision, and guidance to the SECRETAC Coordinator to manage day-to-day operation for the Council.

General Council

The General Council – (Voting Members) is comprised of the two members appointed by their respected County Commissioner Group and the Executive Board for a total of 18 members of the council.

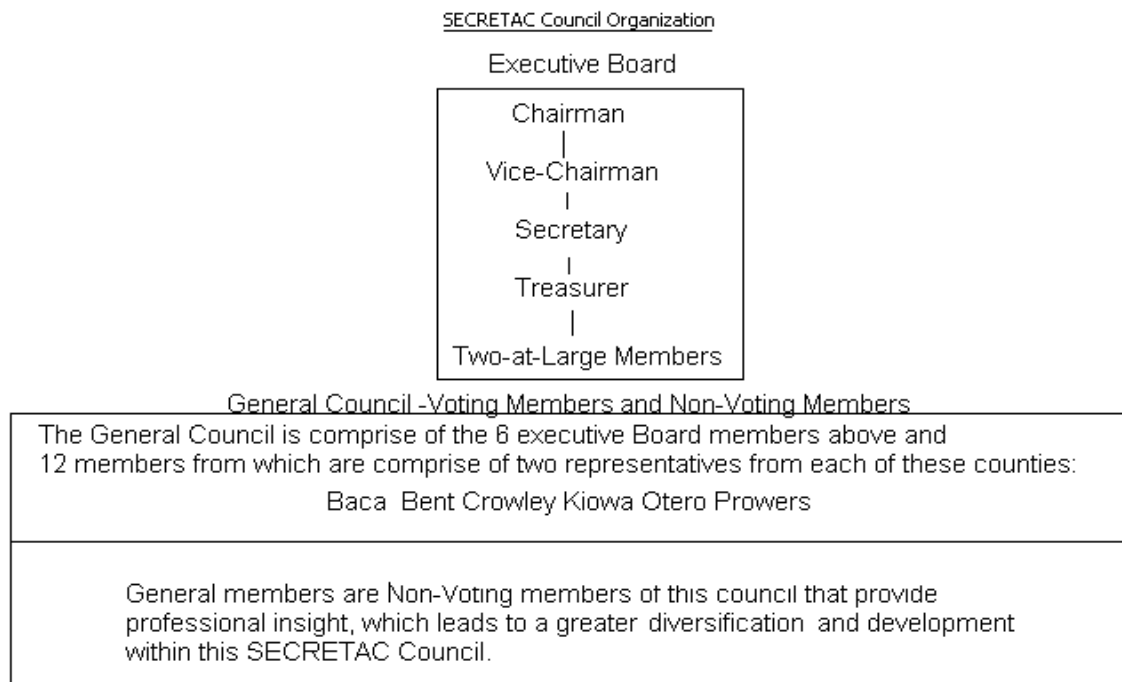
These members provide representation from their respective counties as an extension of their county commissioner groups. They also identified as the Key EMST resource representative for all agencies within their county and the communication link for information from State, Regional, and Local agencies.

General Members

The Full Council continues to facilitate the solicitation for General (Non-Voting) Membership from EMST agencies including, but not limited to, Fire Departments, Law Enforcement, Public Health, Hospital/Facilities, OEM Managers, and the General Public.

The additional members foster the continued growth of the SECRETAC organization by providing insight, technical expertise, and interagency development and coordination in our EMST system. These members also play active roles by participating in Council and Sub-committee meetings.

Below you will find the organizational structure of the RETAC:



C. County Participation

County participation in the SECRETAC Council is encouraged to all members that comprise an EMST system. The Council encourages membership from the general public through leaders in government to be active in their respective EMST system at a county level but also to participate in the Regional Council.

General Council membership has markedly increased over the past two years with more active participation by county officials, other government agencies (public health, law enforcement, OEM) and the general public. While the increase in membership over time is incremental, World events and the increasing health care needs both locally and regionally have resulted in both desire and need for County governments and agencies to participate in the development of health care services.

This Council has three members that are County Commissioners, one of whom represents this Regional Council as a member of the State SEMTAC Council.

D. Coordinator Involvement

The SECRETAC Coordinator provides direction for the current, day-to-day activities, programs and administration of the RETAC. The Council works closely with the Coordinator, who performs the day-to-day operations and provides leadership and technical assistance for all the agencies in this Region and to the Council as a whole.

The Coordinator works at the pleasure of the Council and has assigned duties to ensure the success of the S.E.C.R.E.T.A.C Council. The Coordinator also attends local, regional, and/or State meetings, as a representative of the SECRETAC Council.

E. Political issues

The political environment in the SECRETAC is based on the State's long history of local control government, which provided a challenge with a regional approach to planning and the development an EMST system that crossed county lines.

The County Commissioners and agencies are now less apprehensive and more supportive in the continued development of the regional EMST System. This was achieved through the dissemination of information during SECRETAC Council meetings with key information relating to the purpose and mission of this Council.

F. The Development of By-Laws

The By-Laws were developed in 1999, prior to the formal organization of the SECRETAC Council on July 1st, 2000. The ATAC Council with help from a variety of sources who provided examples of By-Laws with the help of a local attorney began the work to develop the By-Laws.

The By-Laws were completed through work between the ATAC and the EMS Council with the assistance of legal advice. Once the By-Laws were completed a formal approval of the By-Laws by the ATAC and formal adoption of the By-Laws was one of the first acts of the full SECRETAC Council.

The County Commissioners were also involved in the process by reviewing the documents and providing input to the ATAC Council. The first set of By-Law was approved in December 1999. The Bylaws were amended and approved in June 2001. The current By-Laws can be located as referenced in Section 8 on the SECRETAC.com web site.

Below you will find the organizational structure of the RETAC:

Date: 30 June 09					
SECRETAC Organization Chart-June 30 09					
Executive Board			Members		
Baca County	Bent County	Crowley County	Kiowa County	Otero County	Pr
Vice Chair	Executive Member	Chair	Secretary	Treasurer	Exe
Rick Hartley	Cheryl Brewer	Larry Reeves	Eunice Weber	Gary Cox	M
Springfield EMS	Hasty-McClave Ambulance Service	Crowley County Ambulance Service	Kiowa County EMS	Rocky Ford Fire and EMS	Lam Amb
General Council Members (Voting)					
Baca County	Bent County	Crowley County	Kiowa County	Otero County	Pr
vacant	John Spano	Gary Gibson	Donald Oswald	Aaron Eveatt	Dr.
Springfield EMS	Bent County Amb.	Crowley County Fire Dept.	Kiowa County Commissioner	La Junta Fire & EMS	Surge Med
Cecelia Deen	Barbara Martin	Tobe Allumbaugh	Warren Yule	Kent Darnell	E
Southeaster CO. Hospital	Bent County Amb.	Crowley County County Commissioner	Kiowa County Hospital Board Member	Trauma Coord. AVRMC Hospital	Holl Serv

G. The Activities and Committees of the SECRETAC

The Southeastern Colorado RETAC Council meets on the second Wednesday, quarterly with meetings in March, June, Sept., Dec., and a annual meeting in January. Roberts Rules of Order and a standard agenda are used to ensure that the meetings run smoothly.

The Council meetings provide a platform to exchange information on the developmental needs of the region, discuss sub-committee actions, and encourage interaction between Council members and Stakeholders in the continued development of our EMTS regional system.

The Council works closely with the Coordinator through sub-committees that study specific topics to help evaluate, enhance, or provide advice to the region on many issues relating to growth and improving the foundation of the agencies and EMST systems within this Region and State.

Committees are formed by the Council and chaired by one of the executive board members who ensures ongoing leadership and direction of the assigned committee. Committees currently meeting are:

Fiscal: This committee meets at the quarterly council meeting basis to discuss the fiscal operations of the SECRETAC and provide over sight in the development of

the annual budget and accounting reviews. Provides input in the Regional Funding program and other programs or purchases requested. The committee reviews requests from any of the other committees to ensure funding is available for proposed projects. Provides quarterly review and approval of budget and provides recommended annual budgets for the council's approval.

Human Resources/Injury Prevention Committee: This committee provides review, direction and program guidance for HR and Injury Prevention programs, grants and/or committee recommendations for identifying and providing specific services, programs and grants for the region.

Clinical Education Committee: This committee provides review, direction and program guidance for all clinical issues, concerns and programs for the region. Committee reviews all state EMS Clinical issues and provides Council with recommendations and and/or actions to be provided by the region.

Executive Committee: This Committee works closely with the SECRETAC Coordinator in the overall development of the Regional Biennial Plan and reviews and provides reports to the full Council on its development and makes recommendations for approval of the plan on or before June 30th of each odd number year.

General Committee/Task: This committee works on various issues and is assigned short-term tasks as recommended by the full Council.

By-Law: The By-law Committee met on an annual basis to review the By-laws and to provide guidance throughout the year as required by the full Council, with the last update of the by-laws was June 2002. Committee is not in session currently, but, with Council direction be re-arranged for any future action or duty as directed by the Council.

H. The future of the Southeastern Colorado RETAC

The growth of the SECRETAC Council and Regional Coordinator continue each day as systems, agencies, and other professional organizations understand the purpose, direction, and function of our EMST Region.

The vision of this SECRETAC Council is to address the issues of today and provide guidance to correct the threats that impede the development of the EMST systems. This vision will also guide and ensure a strong EMST system that meets the needs of all patients that enter into Emergency Medical and Trauma care networks.

This Biennial Plan establishes the foundation of goals, objectives, tasks, and ideas to meet the Mission of the Council, The Vision of the Region, and the Future of the Southeastern Colorado Regional Emergency Medical & Trauma Advisory Council.

Section Three: SECRETAC Description

A. Overview of the Regional Systems.

The SECRETAC Region encompasses close to 10,000 Square Miles within the Region's 6 counties and a population (based on the 2000 US. Senses) of about 54,000 people.

To better understand the Regional Systems as a whole, one must also understand each county as provided within this section in maps, demographics, population models, economy, and EMST resources. This provides a better understanding and clarification of resources and demographical information that make up this six county region in Southeastern Colorado.

In general, the overview of the Regional System includes: 14 pre-hospital transport agencies; 5 Quick Response Units (QRT's); and 4 hospitals.

The Pre-hospital agencies work together through a regional mutual aid agreement.

There are two Level IV Trauma Centers, Prowers Medical Center (PMC) in Lamar and Arkansas Valley Regional Medical Center (AVRMC) in La Junta. The other two hospitals that are undesignated within the Trauma System are Weisbrod Memorial Hospital in Eads and Southeastern Colorado Hospital in Springfield.

The entire region has E911 and provides EMD Service to the callers that enter into the EMST system and request help. In this region there are 6 PSAP Communication centers. Each of these centers is identified on the maps provided within this section. The PSAP centers also multi-task to provide communication for Fire and Law Enforcement for both City and County agencies.

This region also has a significant transient population that travels throughout the region each day on the main thoroughfares of Hwy's 50, 287/40 (which comprise the newly designated Port to Plains route), and other byways of Hwy's 71, 96, 196 and 10. The population density for the Region, as a whole, is approximately 5.4 people per square mile.

The economic foundation for this region is based largely on agricultural, livestock, small business, and some tourism. As a thoroughfare from interstate and intrastate traffic for travelers, the trucking industry and related services also add significantly to the economic bases.

Drought conditions throughout the State have especially impacted this agriculturally based economy over the last 15 years. The depressed economy and the slowdown in growth and development has fiscally impacted every community and government agency, and in-turn has increased the economic and human resource burden on EMS, Fire, and health care within this region.

The following section divides the Regional System by the Counties within the SECRETAC to better identify this Regional System, geography, demographics, population, and economy including Pre-Hospital and Hospital Resources.

A. Baca County

Geography:

Baca Count has a Land area of appx. 2,556 square miles with a population density of 1.8 persons per square mile. The largest city in Baca County is Springfield, which is also the County Seat. The geography is primarily rolling plains with Mesas in the western-half of the county.

The County borders the states of Oklahoma and New Mexico in the South and Kansas to the East. The County also borders with Prowers and Bent Counties in the North and Las Animas County to the West.

The land use is primarily farming and ranching of beef, pork, and general agriculture. The County also encompasses part of the Comanche National Grasslands in the southern portion of the county.

History, Economy, and Demographics:

In 1889, Baca became an official County of the Colorado by an act from the Colorado Legislature. Most of the farms were homesteaded during this time, many of which are still owned by members of those original families. Today's cowboys still drive, rope and brand cattle as in generations past. Baca County is part of the real American West.

There is still evidence of the routes explorers, pioneers and homesteaders followed as they made their way across the region along one of the three distinct branches of the Santa Fe Trail crossing the southeastern corner of the county. The present day economy is still based on ranching and farming, with irrigated row crops in the eastern area of the county.

Information regarding County Population and Demographics was provided by the U.S. Census Bureau via on-line quick facts, which shows comparison of the County demographics vs. State information regarding similar categories.

EMST Resources:

Baca County has three transport agencies and two Quick Response Units (QRT's), which provide all ambulance service in the County. Walsh Ambulance Service takes care of the eastern half of the county with the help of Two Buttes,

which covers the Northeastern part of the county. Springfield covers the Western half of the county with the help of two (QRT's) in the towns of Campo and Pritchett that responds to incidents in their respective areas.

The EMTS system has 6 transports and 2 QRT Certified Ambulances. The County system also has the support from the 6 Fire departments, 4 organized Police departments, County Health Nurse and the Office of Emergency Management.

The Southeast Colorado Hospital is the only hospital in the County. This hospital is undesignated in the state trauma system. The hospital provides the region with a 24-hour Emergency Department and 25 Acute care beds. This facility also provides 40 nursing

home and 10 Alzheimer's beds. This facility has interfacility and intra-facility transfer protocols for patients that present with high acuity or traumatic injuries.

The City of Springfield and Baca County have made the necessary improvements to the airport to accommodate fixed-wing care flights mission to better serve this county in the movement of patients within the trauma system. The County Communication System Map for Baca County map shows the frequency, location of mobiles, and radio towers.

B. Bent County

Geography:

Bent County has a Land area of appx. 1,514 Square Miles with a population density of 4.0 persons per square mile. The largest city in Bent County is Las Animas, which is also the County Seat. The geography is primarily rolling plains with Mesas throughout the County and canyons in the southwestern corner of the County. The County borders Baca, Prowers, Kiowa, Crowley, and Otero Counties.

Land use is primarily farming and ranching of beef, pork, and general agriculture. The County also has the John Martin State Park, which provide a large reservoir for storage of water for farmer, boaters, camping, and prime fishing location is part of the state.

History, Economy, and Demographics:

In 1889 Bent County was formed by the Colorado legislature. This County has a long history in the development of the Wild West. This county became a primary trading route with the building of Fort Bent in 1833. With the Santa Fe Railroad and the Santa Fe Trail also moving through this same area, Bent County became a focal point for settlers and hunters alike.

In more recent years, Bent County has developed an agribusiness in farming and ranching. Some of the economy is based on tourism with John Martin State Park that was establish in 2002 and the Historical sights of Ft. Lyons, Fort Bent, and Boggsville which was the first County Seat. The County has also attracted a private prison, which has helped the economy in the City of Las Animas.

Information regarding County Population and Demographics information was provided by the U.S. Census Bureau via on-line quick facts, which shows comparison of the County demographics vs. State information regarding similar categories.

EMST Resources:

Bent County has one-transport agency with one Quick Response Unit (QRT's), which provides all ambulance service in the county. The Bent County is divided into two response areas. The stations are located in towns of Las Animas, Hasty/McClave.

The Hasty Station houses a BLS transport unit that covers the area east of County Road 18. This station also has a 4x4 suburban that has been retrofitted as a QRT to move patients from locations inaccessible to standard ambulances. A second BLS unit is housed in the town of McClave on the eastern edge of the County. This BLS unit

responds to the Northeastern corner of the County and supports the BLS unit in Hasty. This Agency also provides support to Prowers County by covering calls, on request (Mutual Aid) to the town of Wiley.

The EMTS system has 4 transports and 1 QRT Certified Ambulances in this County. The county also has support from the 2 Fire departments, 2 organized Law Enforcement agencies, and the Office of Emergency Management.

Bent County does not have a hospital for the EMS service or public, which can delay the definitive care and stabilization of medical and trauma patient. The Ambulance services must provide transport to the closest medical facilities at Prowers Medical Center (PMC) or Arkansas Valley Regional Medical Centers (AVRMC) who are both Level IV Trauma Centers. The EMS Services use County Road 18 as the Destination location for which direction the service will take a patient. If the patient is East of County Road 18 then the patient will be moved to Prowers Medical Center and to the West of 18, the patient will be taken to AVRMC. Medical Control may override this procedure.

The two medical facilities to which this EMS Service transfers patients are Level IV trauma centers. Prowers Medical Center offers a 24-hour Emergency Department with 40 acute care beds. AVRMC also supports a 24-hour Emergency department with 90 acute care and 113 long-term beds. Both facilities have helicopter pads at the facility to handle care flights for transfer and well established airports to handle fixed wing care flights to move patients within the trauma system. The County Communication System Map for Bent County shows the frequencies used, location of mobiles, and radio towers.

C. Crowley County

Geography:

Crowley County has a Land area of approx. 964 Square Miles with a population density of 7.0 persons per square mile. The largest city in Crowley County is Ordway, which is also the County Seat. The geography is primarily rolling prairies throughout with Mesas in the west and northeastern areas of the county.

The County borders Kiowa, Otero, Lincoln, and Pueblo Counties.

The land use is primarily farming and ranching of beef and general agriculture.

History, Economy, and Demographics:

In 1889 Crowley County was formed by the Colorado legislature. This county was developed in the early years as a leader in agriculture. This area prospered with the processing and farming of the sugar beet with thousands of acres devoted to barley, apple trees, plum trees, wheat, and many other crops.

In the Early 1930's the farming became more difficult due to changes in climate, the Depression, and WWII. The reduction in the quality of the soil moved the County from agriculture to ranching and other industries.

Today, the economy of Crowley County is quite different than in the mid 20's. The rolling prairies have reclaimed most of the farmland. New industry has been developed, with ranching and farming still part of the economy, private prisons and other businesses have become part of the new landscape for this resourceful County.

Information regarding County Population and Demographics this information was provided by the U.S. Census Bureau via on-line quick facts, which shows comparison of the County demographics vs. State information regarding similar categories.

EMST Resources:

Crowley County has one transport agency that provides all ambulance service in the County. The County based ambulance service is located in the town of Ordway. This service has 3 ACLS Response Ambulances.

The County also has the support from the 4 Fire departments, 1 organized Law Enforcement agencies, and the Office of Emergency Management.

This county does not have a hospital for the EMS service or public, which can delay the definitive care and stabilization of medical and trauma patients. The ambulance service must provide transport to the closest medical facilities at ARVMC or transport patients to hospitals in Pueblo where two Level II trauma facilities are located.

Designation protocols are in place that identifies which medical facility should receive the patient. When distance and travel time are similar and/or within the 15 min rule, the trauma patient is transported to a higher level of care. The total transport time can be 40–60 minutes depending on the location of the call within the county. The agency works closely with its medical control and standing orders to ensure the patient is transported to the proper destination.

AVRMC is the main support facility for Crowley County and that provides a 24 –hour emergency department with 90 acute beds and 113 long-term beds. The facilities in Pueblo are Parkview and St. Mary Corwin Medical Center, both of which are Level II Trauma Centers.

The County Communication System Map for Crowley County frequency used, location of mobiles, and radio towers.

D. Kiowa County

Geography:

Kiowa County has a Land area of appx. 1,771 Square Miles with a population density of 0.9 persons per square mile. The largest city in Eads, which is also the County Seat. The geography is primarily rolling prairies throughout the entire county. The land use is primarily farming and ranching of beef and general agriculture.

The County borders Cheyenne, Lincoln, Crowley, Otero, Bent, and Prowers Counties. On the eastern edge of the County borders the State of Kansas.

History, Economy, and Demographics:

In April 11, 1889, Kiowa County was created by the Colorado legislature and signed by the Governor on April 18th of that year. In the early years of the County was identified by its rough and tough lifestyle. The railroads were the driving force behind the westward expansion and purchased large sections of land to develop towns along the proposed rail line from Kansas City to Denver.

The rolling prairies throughout this County supported Indians, outlaws, settlers, and businessmen trying to make quick money. A true example of the “Wild West”, justice was swift and permanent, as witnessed by the Sand Creek massacre.

The current economic base of the County is primarily ranching and farming, though some light industry has been developed to support farm and ranch activities. The County has experiencing a decrease in population in recent years. With the drought and decrease in farming has had an adverse effect on the County’s economy.

Information regarding County Population and Demographics information was provided by the U.S. Census Bureau via on-line quick facts, which shows comparison of the County demographics vs. State information regarding similar categories.

EMST Resources:

Kiowa County has one transport agency that provides all ambulance service in the County. The County based ambulance service is located in the town of Eads, with two other support stations in Sheridan Lake and Towner. This service has Four BLS Response Ambulances.

The County also has the support from the 4 Fire Department, 1 organized Law Enforcement agency, 1 Search and Rescue team, County Health Nurse, and the Office of Emergency Management.

Weisbrod Memorial Hospital is the only hospital that serves Kiowa County. This hospital is undesignated in the State Trauma System. The hospital provides the region with a 24-hour Emergency Department and 8 acute care beds. This facility has inter-facility transfer protocols for patients that present with high acuity or traumatic injuries.

This County does not have an active airport facility, so the movement of patients to higher-level care is done primarily via Care Flight helicopters. When the facility moves a patient via fixed wing but must be transported 35 miles south to the airport by the City of Lamar.

Transport times for patients located in the eastern edge of the County can be 40-60 minutes. The system is working to provide additional training to update the EMT staff to better provide the needs of patients who have long transport times. This system does work closely with their Medical Control in the managements of all patients.

The County Communication System Map for Kiowa County the frequencies used, location of mobiles, and radio towers.

E. Otero County

Geography:

Otero County has a Land area of appx. 1,263 Square Miles with a population density of 16.1 persons per square mile. The largest city in Otero County is La Junta , which is also the County Seat. The geography is a mix of rolling prairies and mesas in the central and northern part of the county, and larger mesas with deep, expansive canyons in the Southern half of the County.

The County borders with Las Animas, Pueblo, Crowley, Kiowa, and Bent Counties.

The land use is primarily farming and ranching with small industry in tourism, national grasslands, and historical sites. The region is also part of the Comanche National Grasslands.

History, Economy, and Demographics:

On March 25th 1889, Otero became an official County of the State of Colorado by an act from the Seventh General Assembly of Colorado Legislature. The early years of the County were formed from the activities of the A.T.& S.F. Railroad that made La Junta a key operation center for its train fleet.

With the railroad as the key to commercial traffic in the region, the City of La Junta and surrounding areas were provided the fiscal resources to expand the agricultural base to include the development of crops like watermelons, trees, fruit trees and growing cattle industry lead economic growth in this time. The presence of the railroad also fostered industrial growth in the area as witnessed by the building of a flouring mill in the town of Rocky Ford in 1890. The County was also home to one of the first agriculture experiment stations, which worked to introduce new crops and better cultivation methods. In the modern times, the economic bases for Otero County remains in farming, ranching, and the rail industry. New agriculturally based industry and small businesses continue to drive the growth of this County.

Information regarding County Population and Demographics information was provided by the U.S. Census Bureau via on-line quick facts, which shows comparison of the County demographics vs. State information regarding similar categories.

EMST Resources:

Otero County has 4 transport agencies and one Quick Response Units (QRT's), which provide all ambulance service in the County. Otero County is the largest EMST system within the SECRETAC Region. The four transport agencies are located in La Junta, Rocky Ford, Manzanola, and Fowler. The only QRT is located Cheraw and it also doubles as the County's Hazmat medical transport unit.

La Junta Fire and EMS responds to the Eastern quarter of the County from the town of Swink, east to the County Line. Rocky Ford Fire and EMS Responds in the Central part of the County and along Hwy 10 that travel through the SW corner of the County. Manzanola and Fowler respond to Western quarter of the County. All of the EMS agencies support each other through mutual aid agreements.

There are also the two private transport ambulance services that focus on Intra-facility transfers. Critical Care Transportation-Trans-Care, is a service based out of Fowler has. These agencies provide service to the 4 hospitals within this Region.

The EMTS system has 10 transports and 1 QRT Certified Ambulances in this county. The county also has support from the 3 Fire Departments, 4 Law Enforcement agencies, a County Health Department, the American Red Cross, and the Otero County – Office of Emergency Management.

Arkansas Valley Regional Medical Center (AVRMC) is the only medical facility within this county. AVRMC is a Level IV designated trauma Center. This facility provides a 24 – hour emergency department with 90 acute beds and 113 long-term beds. Fowler Fire and EMS, because of their location in the County transports to either Parkview Medical Center or St. Mary Corwin Hospital in Pueblo.

All agencies have developed destination protocols and work closely with their medical control and medical advisory to ensure all patient are taken to the appropriate facility.

The County Communication System Map for Otero County frequencies used, location of mobiles, and radio towers.

G. Prowers County**Geography:**

Prowers County has a Land area of appx. 1,640 Square Miles with a population density of 8.8 persons per square mile. The largest city in Prowers County is Lamar, which is also the County Seat. The geography is a mix of rolling prairies, farmland, and the Arkansas River that run through the Northern half of the county. The County borders with Kiowa, Bent, Baca, and to the eastern boarder of the county is the State of Kansas.

The land use is primarily farming and ranching with the small industry, This County is one of the major crossroads in the United States with HWY 50 and 287 that crosses in this

small community. Small business and industry have been created to welcome and support the many truckers, travelers, and business that move through this town daily. This town does provide some tourism as one on the key towns on the Santa Fe Trail.

History, Economy, and Demographics:

On March 25th 1889, with the break-up of the larger Bent County at the time, Prowers County was created by an act from the Seventh General Assembly of Colorado Legislature. The early years of the County were formed from the activities of traders and expeditions as the westward movement from St. Louis occurred in the 1820's. With the homestead act of 1909 and the second wave of homesteaders, new towns and the continued development of farmland and cattle ranching increase with time. At various points in the county history one can see the industry of modern technology with flour milling, milk plant, beef processing, and the introduction of international industry of a German Bus Plant-which closed in the 2006.

In recent year the county economic base has been hit from the drought that has hit the farming and ranching industry. The county is looking to venture into new industry like private prison and alternate emergency in Wind Farms.

Information regarding County Population and Demographics information was provided by the U.S. Census Bureau via on-line quick facts, which shows comparison of the County demographics vs. State information regarding similar categories.

EMST Resources:

Prowers County has two transport agencies and one Quick Response Units (QRT's) that provides all the ambulance service in the County. The two transport agencies are the Lamar Fire and EMS that responds in the western 2/3rd of the county. Holly EMS and Granada QRT covers the Eastern 1/3 of the County. Both transport service provide ACLS Care to its patients when those certified volunteers or paid members are on board. All of the EMS agencies support each other through mutual aid agreements.

The EMTS system has 6 transports and 1 QRT Certified Ambulances in this county. The county also has support from the 5 Fire Departments, 4 Law Enforcement agencies, a County Health nurse, and the Prowers County Office of Emergency Management. Prowers Medical Center (PMC) is the only medical treatment facility within this county. PMC is a Level IV designated trauma Center. This facility provides a 24 –hour emergency department with 3 acute beds and 30 long-term beds. Holly EMS, because of their location in the County does transport to the hospital in Syracuse, Kansas.

All agencies have and/or will be reviewing their developed destination protocols and work closely with their medical control and medical advisor to ensure all patient are taken to the appropriate facility.

The County Communication System Map for Prowers County frequencies used, location of mobiles, and radio towers.

Section Four: Needs Assessment Process-Completed on a Annual Basis

The process of the SECRETAC Needs Assessment for this Biennial Plan was to gather stakeholder input via the Regional Funding Program and other assessment tools. The Regional Funding Plan required each system to perform a S.W.O.T. analysis for each calendar year. The plan also required stakeholders to complete a template that followed the Region's Biennial Plan template to include the 15 State identified components.

This process facilitated structured information from a similar format, which provided needs in a quantifiable form, and provided a linier process to develop the Regional Biennial Plans – Goals, Objectives, and/or Tasks.

The Executive Committee and the Council review the County EMST plans and defined goals and objectives for continuing development of each of the SECRETAC EMST Systems on a annual basis, with a formal Council meeting to review and approve the annual County Plans in January of each year.

Each county compiles and integrates their county goals and objectives to complete the County Plan for stakeholder review. The review process of the Biennial Plan began on Jan 22nd 2003 and have taken place on odd years since forth. Stakeholders were asked to review and provide comments on the draft of the Biennial Plan. They complete the draft of the Biennial Plan with the incorporation of the S.W.O.T. Analysis, County Plans, and the inputs from the Region's Stakeholders.

The Biennial Plan Progress Report is then re-submitted to the stakeholders for review and final comment period regarding all aspects of the propose plan and approved by the Executive Committee on or before June 30th of the even years.

Future assessments will be conducted through this same process by the submission of the Regional (County) Plans on or before the January annual meeting of each year. This process will ensure that the Region can evaluate the annual growth and identify needs of all EMST systems. The Agencies will provide a semi-annual reports to the Council for evaluation as required by the Fiscal Rules of the Regional Funding Program.

The S.W.O.T. analysis can be located for each County within the County's Plans. Please Refer to Section One of the Regional Funding Plan (County Plans) plans for additional information.

Section Five: Prioritization Process

The prioritization process focused on Regional EMST system(s) components with the greatest risk and/or threats for system degradation. The prioritization of Goals and Objectives was also based on the Regional Funding Program Fiscal Rules as described in Part One, Section Three of the County EMST Plan.

Each goal has identified objective(s) and task(s) that define the process, timeframe, and responsibility for completion. These goals are identified within the year or on-going time lines.

The definitions listed below will identify the approximate time frames for Goals, Objectives, and/or Tasks to be completion. This is subject to change due to Federal, State, Local regulations, or Policy/Protocols as identified by threats to this EMST system.

Short Term: Tasks or Objectives to be completed within two years.

Short/Long Term (ANNUAL): Tasks or Objective started within two years but may take multiple years to complete. Task or Objective started as short term, but requiring annual review; or ongoing review; or does not have a stop date.

Long Term: Tasks or Objectives that will be started and/or completed within 3-5 years.

Undefined: Goals, Objectives, or Tasks that have been identified, but cannot be started or completed due to lack/insufficient funding or FTE. The goal is identified as essential due to the potential impact on the EMST system.

Section Six: Summary of SECRETAC Goals and Objectives

Introduction:

The Southeastern Colorado RETAC Biennial Plan identifies system threats, creates system direction, and enhances the regional approach to building an EMST System. The Regional Funding Program (County Plans), Stakeholders, and other sources of information provided the foundation for the development of this plan.

The overall plan provides many Goals, Objectives, and Tasks that define a wide range of topics specific to the needs, growth, and future of this SECRETAC Region. As identified in the 15 components of this plan, one can see the many issues that this Council has listed the focus on system and individual needs for the EMST agencies, facilities, and other key professional organizations.

This section identifies specific Goals and Objects this Region will focus on in the next two years and the years beyond. The Plan is designated to reduce critical threats, enhance system integrity, provide a guideline for future development, and a solid vision to meets the customer's day-to-day needs.

The Goals and Objectives below have been prioritized, as listed. This was accomplished through discussion and direction from the SECRETAC Council, Biennial Plan Committee, and Stakeholder inputs.

The following information provided is a summary of the identified Goals and Objectives this Council will be working on the next two years and beyond. This Council will continue to address the development of the 15 components as the global direction and future for this EMST System.

As goals are completed, the Council will forward the next critical threat from the 15 components to Section Six. This will provide a location to track the evolving scope of work in the development and the future success of the SECRETAC region.

Goals in the next two years: FY09-11

The next two years will focus on items in this plan that threaten the survivability of agencies and/or facilities within this EMST system. The threats that this Council has identified are the goals of improving areas relating to Human Resource and Fiscal Resource.

Goal #1 Human Resource:

Human Resource is the primary concern of the Southeastern Colorado RETAC EMST System. This region has experienced a decline in the number of available professionals to staff Facilities, EMS Agencies, and Fire Departments. There are several factors that have lead to this shortage:

- Decreasing Economic Conditions
- Decrease in Adult Volunteerism in the EMST professions
- Increasing Cost of Initial education
- Decreasing population demographics
- Increasing time requirements for volunteers/employers alike

Over the past ten years agencies have seen a decline in the number of volunteers that has impacted all of the agencies (includes QRT's). Hospitals face similar concerns with the availability of medical professionals to staff their facilities.

The low population base in the communities and other social/demographic factors in this region have significantly limited the number of available skilled health care workers for hospitals, clinics and long term care centers.

Objectives

The primary objective to meet this goal is to identify needs concerning the staffing of all service providers to include, but not be limited to, dispatch/ communications, first responders, prehospital care transport services, facilities and tertiary care. This information will be gathered by the Council, at the direction of the Coordinator, using direct and indirect tools and will take place with the support of EMST directors and facility administrators, within the region. This task is a multiple year objective and an on-going Bi-annual Plan Objective.

A second objective is to determine trends from historical data that will help in projecting staffing issues in the future. This information will be researched, gathered and analyzed by an assigned committee using direct and indirect tools. The Coordinator provides an annual Agency Profile summary for the council and individual agencies. The Council and/or the Clinical Education Committee facilitates meetings to provide creative, structurally sound and long lasting solutions to address the findings. The expectation is that a program will be developed to provide funding to address staffing needs in the region. These tasks are completed annually and the Committee provides the direction and guidance for address the findings from the state's Matrix Data Base: Agency Profiles.

Another objective is to increase accessibility and affordability of educational programs, improve the retention of current providers, provide more regional educational programs, and improve programs in initial training centers. The first task involves the Coordinator providing potential programs, funds and resources for not only EMTS Provider Grants, but, alternative funding sources, i.e., Colorado Rural Health Center and collaboration from CDPHE/All Hazards Preparedness Program and other non-traditional program resources. Both state and federal programs are reviewed and explored for potential programs on an annual basis.

The committee will include members from all professions in the EMTS system that will perform an assessment to determine regional educational needs. This group will evaluate the information and formulate solutions to mitigate the issues stated above. The work will be completed through a series of open public meetings organized by the SECRETAC Council and it's committees. This is a on-going multiple year task.

The SECRETAC Council will monitor the outcome of each Goal, Objective, and/or Task as identified for this Goal. The measured outcome will be through a variety of reporting methods from completed Reports, End of Task Reports, Committee meetings, CQI or other methods as defined by the SECRETAC Council.

Goal #2 Fiscal Resource:

Introduction

Fiscal resources in the EMST organizations are the baseline for all activities and foster the ability to provide medical services to the communities within this Region. The depressed economy in the Region and State, and the difficulty in receiving reimbursements from insurance companies, Medicare and Medicaid have placed a significant financial burden on the EMST System. The purpose of this Goal, with fiscal resources as a multi-discipline subject, is to provide advice and technical expertise to organizations to assist them in becoming financially sound. The Council does not have the authority to change the fiscal practices of facilities, agencies, or other organizations, but does have the ability to provide technical assistance and recommendations to organizations regarding business practices that will increase the fiscal resources required to provide the needed EMST Service within this Region.

The focus of this Goal is to work with all agencies to identify fiscal needs and create solutions to ensure the success of each agency to provide service to its communities, equipment to perform the service, and the funding to facilitate training to maintain current professionals and recruit additional ones.

Objective

The first objective is to gather and review fiscal information from each EMST agency, and recommend a fee structure and/or business practice that will create and support the mission of the EMST agencies.

With the full support of the EMST Directors and Administrators within this Region, the Fiscal Committee reviews information that is gathered by the Council, using direct and indirect methods. The Committee will be tasked to and/or provide assistance in the development of agency-by-agency fee structures that will support the mission of the Region's agencies. This task is a on-going, multiple year task.

The next task is to re-evaluate regional issues dealing with insurance and Medicare reimbursement. This Council worked with Medicare in FY02 to identify the causes of low reimbursement and/or high denial rates within this Region. The SECRETAC approved a June 2010 "Trailblazers" workshop for the region in Lamar, CO. The Fiscal committee, Executive Committee and the Council will work directly with EMST Directors and Administrators to identify and/or provide assistance with insurance reimbursement. As a task of SECRETAC, this should create a positive environment to work with insurance providers and create solutions to the ongoing reimbursement issues.

The Fiscal committee will identify, review, and make quality recommendations to the Full Council on methods and improvements relating to agency financial status and reimbursement rates. This task is a on-going multiple year task.

The second objective is to identify, locate, and provide resources that will better support the critical needs of the EMST agencies and responders. The tasks of this objective are to identify the fiscal needs relating to Goal #1 Human Resource, educational, and equipment costs. Additionally, to complete this Objective, this committee will recommend solutions and funding sources to meet the identified Goals and Objectives.

The first task was the SECRETAC Council to appoint the HR/IP committee to work on solutions that will meet the needs of the EMST professionals and agencies. Through a series of meetings

and/or direct/indirect methods, the committee will work with agency Directors, administrators, and other system professionals to create, recommend, and develop a regional program to enhance Goal #1: Human Resource, educational and equipment needs. This task is completed at the quarterly council meetings, each year. Committee meeting minutes are available and offered as a download of the secretac.com web site.

This committee will work closely with the Regional Coordinator, OPSFS, OEM, CDPHE – EMTS Grant Program, and other possible funding sources to make regional improvements in this area. The progress of this committee or task force will be monitored by the Full Council and is measured through reports, successful comments from Stakeholders, and/or follow up studies. This Objective should be completed annually and quarterly at the quarterly council meetings, by the coordinator.

Goal #3 Mass Casualty Incident (Emergency Support Function: ESF#8)

Introduction

Mass Casualty Incident (MCI) (ESF#8) was directly identified as a threat to the operational readiness of the SECRETAC Region. As stated previously in this plan, there are significant shortages in human resources, fiscal funding, operational equipment, and training to mitigate the threats of Biological, Chemical, and Weapons of Mass Destruction. Additionally, this Region is confronted with daily Hazmat threats from truck and rail traffic, and extreme meteorological weather events that occur throughout this region on a seasonal basis.

This Region has focused on mitigating the threats that are associated with MCI by the completing a Regional Mass Casualty Plan (ESF #8), coordinating pre-planning efforts for WMD to include Chemical and Biological threats, and enhancing Regional MCI communications. Goal has been completed in 2009 and copy and MCI Plan for SECRETAC is available on line on the SECRETAC.com web page.

Objective

The primary objective is to facilitate a regional approach to preplan and mitigate for the possibility of an MCI or All-Hazard Event in the SECRETAC Region.

The first task is for the Chairman of the SECRETAC Council to form an MCI Committee with the direct support of all EMST System Agencies within and adjacent to this RETAC who could possibly support the SECRETAC Region in an All-Hazard event. The projected start date for the formation of this committee, and its first meeting date is NLT 1 September 2003. Task Completed.

The second task for this committee will require the support of the Regional Coordinator, Agency Directors, and Administrators. The committee will schedule a series of meetings, at locations, to complete the following tasks within the proposed timeline: Task Completed.

- Development of a Regional MCI Plan (ESF #8) NLT 1 April 2004-Completed.
- Development of Regional WMD, Bioterrorism, Chemical, and Decon Training for all EMST Agencies NLT 1 Sept 2004-Completed.

- Development and Funding of Regional HazMat Teams 1 June 2005-Completed.

The SECRETAC Council will monitor and measure the progress of this Objective through continued reports, minutes, or other tools as defined by the Council and by OEM Managers in the Region. The Council will address any future concerns, issues or programs as they are identified and brought to the Council.

The second objective is to coordinate and enhance the communication capability and interoperability for the purpose of day-to-day operation, mutual aid, and All-Hazard response. Council has provided funding and programs to achieve identified issues and barriers.

This Objective is a long-term issue for this Region, but with the current threats to the EMST system, forthcoming changes in FCC policy, EMST agency interoperability, and the possibility of MCI or Wild Land Fires, this Region must begin the task to improve and enhance the system in a Regional approach. This objective is a on-going, multiple year objective.

The first task for this Objective is for the Chairman of the Council to create a Communications Committee that will include Agency Directors and Administrators, or appointed representatives, for all affected EMST organizations including PSAP Centers. The initial meeting of this Committee will be NLT 1 Sept 2003. Completed.

This committee will be responsible for gathering information regarding the current and impending threats to Regional communication system(s), using direct and indirect tools. Tools for information gathering will be developed, with the support of the Regional Coordinator, at the first committee meeting. Information gathering should be completed NLT 1 Jan 2004- Completed.

The second task for the committee will be to analyze, formulate, and provide recommended improvements in the Regional Communication System(s) relating to day-to-day operations. This will be accomplished through a series of scheduled meetings that will include all identified Stakeholders within the Regional EMST system. Completed.

The third task for the Communications Committee is to make recommendations to the Full SECRETAC Council and all EMST Stakeholders that includes, but is not limited to:

- Current system status and compatibility
- Recommended changes to meet All-Hazards Responses
- A list of equipment needed to make all improvements
- Projected Cost and identified funding sources

The timeline for this Objective is flexible. Outcome is and was dependant on creating regional partnerships, the implementation of FCC rules, and issues relating to fiscal planning to ensure the necessary system upgrades. The proposed timeline to complete an initial report to the Full Council will be NLT 1 Oct 2004 and a full report NLT June 2005. Completed.

The Full SECRETAC Council will monitor the progress and method to measure the outcome of this Goal through the assigned committee. On-going, multiple year goal.

Goals: Two years and beyond

Introduction

As stated in the earlier introduction it is difficult to place specific goals, timelines, and tasks on issues that will impact this Region two or more years from now. This section will identify those Goals that are currently system threats, but require more than two years to complete. Factors that affect the longer timelines are the complexity of the issues involved and the lack of fiscal resources and/or manpower to dedicate to the completion of these Goals. The Goals this Council will focus on to strengthen and enhance this Regional EMST System are listed below.

Section 2: Accomplishments for Biannual Plans

Please list any accomplishments in the area of EMTS in your region. Please list any partners on projects or accomplishments.

Narrative: Over the last five-years the Southeastern Colorado RETAC, via our Biennial Plans which were submitted in July 1st 2005, has strived to complete work that was identified throughout the entire plan. With the prior format of the Biennial Plan the SECRETAC Council identified three primary components which provide our KEY Goals and Objectives.

These Goals were #1: 5 Human Resource, #2: 4 Fiscal Resources, and #3: 11 Mass Casualty (ESF #8).

To make this section functional and easy to understand, the **Goals** will be listed in two parts:

Part One - Will focus on the accomplishments of the components and goals that are outlined in Section Six of our FY09-11 Biennial Plans

Part Two: Will focus on the remaining items that were identified in the long term goals of Section 6 of the prior plan and to include completed items from the other components that were listed in the last section of the prior FY 2009 Biennial Plan.

Please note: All the information, as noted in each item below, contains within their heading a defined goal, objective, and/or task and what component it addresses. Some goals, objectives, and/or tasks have been grouped together within a component, as one accomplishment may have covered multiple items.

Accomplishments Goal 1: Human Resources

Goal 1 Objective 1 – Human Resource: Developing Documents

The EMTS County plans were developed by the RETAC Council to meet this objective for system assessment. Each county completed plans for each year that includes an S.W.O.T. analysis that identified their Strengths, Weaknesses, Opportunity, and Threats. Within their plans they addressed those 15 components in which one may have been human resourced. You can see the completed County Plans, their accomplishments, and the S.W.O.T. assessment as they have related to Human Resource issues. Please refer to the County Plans Attachment A.

Goal 1 Objective 2 –Human Resource: Developing Tracking and Recruitment & Retention (R & R) Programs

From the first Goal 1.1 above this objective was to create document's (County Plans) that were functional in gathering information on a yearly basis to track the number of responders, number of agency responses, and number of patient transports.

These plans were also developed to identify system threats via the S.W.O.T.S. analysis, and what each system has identified within their plans, as it relates to human resource issues. This includes number of personnel, educational issues, and fiscal resources to maintain and/or recruit new EMS Responders.

Within these plans, information has been extrapolated into a chart to help track trends in number of responders and the operational tempo within the region. Based on the current numbers, there has been a minimal increase of providers over the last four years. With all levels, the greatest increase is in the First Responder level. By reviewing this information on a yearly basis and as the years move forward, the council will be able to better identify system needs on a regional or local basis. Matrix Data from Agency Profiles are required to be updated on an annual basis. SECRETAC Coordinator provides verification and regional agency profile data to the council on an annual basis. Link to EMTS Office Matrix
<<http://www.cdphe.state.co.us/em/emtsdata/index.html>>

From this information the SECRETAC Councils Human Resource Committee, recommended that that R&R Grants be written to help increase educational awareness of what EMS and First Responders do within their jobs enhance the visibility of EMS as a career, and to gain new members to local agencies. The Council was awarded several R&R Grants in FY06-09, years.

An EMTS Provider Grant 2007-08: Recruitment and Retention Needs Assessment for SECRETAC was received and the final report of the R & R Needs Assessment was provided to the EMTS Provider Grant Program as well as posted on the <SECRETAC.org> Web on June 30, 2008. The Council has reviewed and provides direction and resources for the findings of the grant. A Recruitment and Retention Grant: Statewide Marketing for SECRETAC was approved and funding for the grant will be provided during FY08-09 from the Colorado Rural Health Center (CRHC). A report & findings provided to SECRETAC Council at the conclusion of the grant program in 2010 and also available on the <secretac.org> web page.

Goal 1 Objective 3 – Human Resource: Networking and Information Sharing

The main focus of our quarterly meetings is to share information between each EMTS system, share what has been accomplished, and any future educational opportunities. The quarterly meetings provide each county and agency with valuable information on resources, programs and opportunities for both our region and the state.

Goal 1 Objective 3 – Human Resource: Networking and Information Sharing (cont.)

Training opportunities in the region and state are sent to all EMTS agencies. SECRETAC Clinical Ed. Committee reviews, provides analysis and directs the RETAC to provide the most cost-efficient, accessible educational programs to the region.

Goal 1 Objective 4.A. –Human Resource: System Threat

The SECRETAC Council is working with the colleges, Otero Junior and Lamar Community to address the affordability, accessibility and quality of EMS Educational Programs in the region. Both Colleges have committed to resource sharing, coordination of regional programs and have EMS Educational Coordinator staff to address the critical issues. SECRETAC is collaborating with both colleges to also provide affordable, accessible and quality continuing education for all ems providers in the region. FY2009-10 a EMTS Provider Training and Education Grant for a pilot EMTB Scholarship Program was submitted, received approval and was funded. Final report will be provided to SECRETAC Council at the September 8, 2010 meeting. All EMTS Provider Grant requirements and documentation have been submitted within grant deadlines for FY2009-10.

Goal 1 Objective 4.B. – Human Resource: R&R Grant Request

The SECRETAC Council assigned a committee to work on Human Resource issues and will continue to meet as a standing committee with support from the regional coordinator.

The SECRETAC.org web site issued to post educational offerings, recruitment needs, and for retention programs that the community and first responders can see and to obtain information at any time is One objective is to provide an awards program that recognizes our rural responders. The Lamar Fire and EMS Chief was nominated by SECRETAC and was awarded the “EMS Director of the Year,” award at the annual EMS Awards banquet in May in Denver, CO. Ms. Eunice Weber, EMS Dir., Kiowa County EMS was nominated and selected as the EMT-B on the Year Award in 2008..

The second objective was to find financial resources for a regional EMS Scholarship to attend the annual “EMS Conference.” applications to the Colorado Rural Health Center provide scholarship support. SECRETAC applying for this grant on an annual basis from CRHC. The region has also been provided additional resources/scholarships to state programs from The Children's Hospital and Emergency Medical Services Association of Colorado (EMSAC) for the annual Children's Conference held in January 2010, Denver and the TEEX Course provide to SECRETAC region in December 2009, at the Otero Jr. College, La Junta, CO.

Goal 2: Fiscal Resources

Goal 1 Objective 1 –Fiscal Resources: EMS Provider Grants

providing technical assistance to those agencies that requested assistance in the writing of EMS provider grants The SECRETAC Coordinator provides technical assistance over to agencies in developing, reviewing, and making recommendations in State EMS Provider Grants throughout this Region.

For the FY09-10 SECRETAC has been awarded \$22,650 for the provision of EMS Management Forum and EMTB Pilot Scholarship Program from the EMTS Provider Grant Program.

By assisting these agencies through technical assistance, specific requests that have impacted funding that are available for Human Resource issues. The matching grant funds provide

resources-ambulances and educational programs that benefit agencies/responders and ultimately provide better care to the citizens and visitors of Colorado with the first EMTS Provider Grant Awards to SECRETAC \$ 316,460.00* (JMB: Cycle & II FY10).

Goal 2 Objective 3 –Fiscal Resource: Regional AED Program

SECRETAC with the support of the EMS agencies, community, and civic organization has coordinated with the Regional Council in the ongoing AED program that has been funded through the Colorado Rural Health Center. Every ambulance that responds in our area has an AED that is current, maintained and available for use. SECRETAC provided a support letter to the CRHC, Feb. 26, 2010, to the CDPHE/HF*EMSD, EMTS Section for the RFP:TM-EMS1002.

This program has helped improve the level of response of the communities Ensigncy and in decreasing the time to first shock for a patient who is in cardiac arrest. Several “success” stories have been reported in the local news and documented “saves” have been reported.

Goal 2 Objective 1 – Fiscal Resource: Enhanced Enforcement Program

The SECRETAC Council has continued to be active in searching for funds that help accomplish the 15 components The Council approved the additional mission and goal of the Human Resources Committee to include: “Injury Prevention” programs, at the March 11, 2009 meeting. The Committee has approved a long-term, regional IP program to address the number one traffic safety issue in the area; seat-belt usage. The three year program will be developed to provide data, resources and interventions for the six counties of our region. A comprehensive evaluation will be provided to the grantor (Colorado Department of Transportation-CDOT and the Council. . . More information on this program is under Injury Prevention.

Goal: Mass Casualty Incident (MCI)

Goal 3 Objective 1 Tasks 1 – Mass Casualty Incident (MCI) – Committee COMPLETED.

The SECRETAC Council, The MCI Committee, headed by Dr. Andrew Saueracker has reviewed, analyzed and completed MCI Plan. The Council reviewed and approved the plan at the March 11, 2009 meeting. The SECRETAC MCI Plan is now available for download and review at the <SECRETAC.org> web page.

Goal #4:

Goal added in Component 11.4: Surge Trailers & DeCon Trailers: Completed

The development and completion of the Regional Surge Capacity trailers that support facilities in expanding bed space during a pandemic or disaster that may over load a local system. The region received equipment and supplies that stocked 5 trailers, via the HRSA grant, that can be pulled to any part of the region in support of the medical facilities to maintain up to 500 additional patients in a defined event. The Surge Trailers are in Lamar and La Junta and are ready for activation. CDPHE/HPP Program provided \$10,000 for the DeCon Trailer, in Springfield and Ordway with updated equipment in FY09. The two trailers have been inventoried and provided with new equipment. Equipment list is available upon request.

Goal #5:

Goal Added in Component 11.5 Burn and Trauma Care Supplies-Completed

Additional funding was provided through the HRSA Funding program. With the HRSA program, Facilities have received \$50,000 each to help enhance inpatient medical care for trauma and burn patients. In May 2005, our region was awarded through the HRSA grant an additional \$30,000 to purchase pre-hospital supplies to help ambulance services and on scene medical care teams to re-supply for trauma and burn type patients. This program started late in our year and was completed in 2005, all are in place and ready for activation. Goal completed.

Goal 3 Objective 2 – Tasks 1 & 2 MCI (ESF #8): Communication-COMPLETED

This objective was defined in our plan as a critical threat to any MCI event from a local and regional prospectus and will take years to identify funding sources that will cost this region millions. The federal government has provided funding to support increased readiness through homeland security funding and law enforcement grants. The State of Colorado with local governments has been building a statewide DTRS 800 radio system. The SECRETAC region will have accomplished a major goal of having DTRS 800 radio system implemented in all six counties and throughout the region. Goal Completed.

The SECRETAC Council has supported the efforts of the OPSFS -All hazard council that has worked with all first responder agencies in enhancing the Regional radio system by funding 800 DTRS radios and communication equipment to all agencies (Law, Fire, EMS, and the medical treatment facilities) as the main communication link for all agencies within a disaster. This does not replace current systems, but provides a secondary system that enhances ICS Command, Control, and operational components of defined MCI events.

The SECRETAC Council has two members who are members of the Regional all-hazard meetings Note: That this goal also addresses Task 11.2.A.1 to continue to improve communications with all response agencies.

Goal #6: Integration of Health Services**Component 1: Integration of Health Services**

The first two goals of this section is an ever-evolving work to network throughout this region, state. The SECRETAC has developed a networking and informational sharing process within the region, with the support of the regional coordinator, by having open public meetings of the SECRETAC Regional Council

The two major accomplishments from the region through developing the network and integrating this region have been the ongoing work on the 800 MGHTZ DTRS Radio systems and the completion of the 9 County Mass Vaccination clinics that involved three RETACs and over 800 professionals. The successes of these programs were not just from the council objectives and tasks, but also through the ongoing support from all EMTS agencies and the willingness to participate from them to integrate this Region.

Included in the above is the continued support of the SECRETAC by the County Commissioners who have continued to support our council through the appointment of 3 representatives per county. Recently one of the County Commissioners has accepted a position that will leave the council with two representatives from the commissioners.

Component 2: EMST Research--Goal 1 Objective 1 Task 2:

The Center of Disease Control (CDC) through the Injury Prevention department of the CDPHE & the Colorado Dept. of Transportation (CDOT) will provided funding to develop program in the rural communities in seat belt usage though an enhanced enforcement program.

The enhanced enforcement study program has received app. \$75,000 a year for three years, starting in October 2009. CDOT has re-evaluated the funding and now provides up to \$75,000 for the first year. In May, 2010, CDOT held a regional conference in Montrose where they outlined the new Occupant Protection Grant with a annual budget projection of \$65,000 per year for the next three years; FY10, FY11, FY12. CDOT Grant due June 30, 2010 with a Fiscal year of Oct. 1 to Sept. 30th. SECRETAC has approved the second grant application.

Component 3 – Legislation and Regulation--Goal 1 Objective A Task 1 – Regulation

The SECRETAC Council has submitted a Biennial plans that provided a two-year direction for the improvement our regional EMTST Systems since 2004 This Biennial Plan FY09-11 will mark the fourth Plan. The EMTS has developed and approved a contract for the first statewide RETAC Assessment. The Contractor will utilize a template tool provided and improved from the Western Colorado RETAC Assessment, FY07-08. The contractor over a three year (09-11) period assess and report on approximately three to four RETACs per year. SECRETAC is scheduled for the third year, with a report provided in 2011-12 fiscal year. The corporation that received the bid for the Statewide Needs Assessment Program (SNAP), Abaris has completed its draft needs assessment of the region. Mr. Ken Riddle, Arabis provide the final draft report to the council at its June 9, 2010, meeting in Springfield, CO. Drafts have been provided to the Chair and the coordinator for review of minor data. SECRETAC Executive Committee will be provided with reviewed final draft and when approved a copy will be posted on the web page <secretac.org>and provided to the EMTS Office. The SECRETAC Council will place SNAP on the agenda for review and action at the Sept. 8, 2010 meeting, in Las Animas, Fire Dept., Colorado.

The EMTS Section, the Colorado Dept. of Public Health & Environment and the Governor's Office have approved and provide a bill; Senate Bill 02, in 2009. The bill would increase the Highway User Taxpayers Fee (HUTF) to \$2.00 (a one dollar increase). The bill has passed both the senate and house committees and is now at the Appropriations Committee. The Governor has signed the bill and was effective; July 1, 2009. Approximately \$6.2 million will be available on a annual basis for the EMTS Office and Grants Program. SEMTAC Public Policy Committee is developing new rules, regulations and policy. Two SECRETAC Members are currently SEMTAC representatives; Mr. Larry Reeves, Chair and Mr. Gary Cox, Ad-Hoc member. Both provide assistance and guidance from our region to the state Council and the EMTS Office.

The EMTS Section will begin the process of identifying any new rules and regulations that are scheduled to be implemented due to the increase in the HUTF for EMS, July 1, 2009. The EMTS Section has anticipated that the process may take up to one to two years, with any new rules and regulations effective July 1, 2010.

The SECRETAC Coordinator continues to monitor and forwards any regulations or legislative issues via the Internet to ensure the region is well educated on the topics and issues that impact

our response agencies The National Scope of Practice have been reviewed and recommendations have been passed for the new EMT levels. The Council plans to continue monitoring the proposed national care level and to also make our comments know to the state SEMTAC and the state EMS Director. SECRETAC has an appointed member, Mr. Larry Reeves, EMS Dir. Crowley County EMS, and Chair-SECRETAC, to the EMTS Ed. Standards Committee and has been instrumental in both the work of the committee and keeping the Council informed as to the progress of the committee and Educational Standards issues in Colorado. In addition to our representative on the Governors appointed Council, a Council member, Mr. Gary Cox, Chief EMS and Fire, Rocky Ford, CO. has been appointed as a RETAC representative to the council effective 2008. Both representatives provide a “voice” for our region on legislative and rules and regulations effecting our providers, agencies and region.

Component 4– System Finance--Goal 1 Objective B Task 1-6: County Plan(s) Funding

The SECRETAC Council in the past four years has continued to support the building and development of the Regional EMS agencies and EMTS Systems, by providing funding to support county efforts to enhance and support programs that improve patient care.

The, “County Plans”, are a document that counties use to define their goals and objectives to enhance any of the 15 State EMS Components to improve medical and trauma care within their counties and to build EMTS system capacity.

SECRETAC Council has awarded to the six counties (\$90,000 per year) through this funding program. The funds are in statue have been increased by a one-time increase of \$20,000 identified for Regional Training and Education for the development and provision of Farm Medic Programs and a High Angle Rescue Program for the next fiscal year (July 1, 2020-June 30, 2011). There is \$75,000 provided for the operational funding for the RETAC. The total per year is \$185,000. The SCOPE of Work for the RETAC has identified these funds and their reporting requirements per the Bi-annual Plan.*

* RE: The Southeastern Colorado RETAC request for a one-time increase to base funding in the amount of \$20,000 for FY2010-11. Notice of approval received Monday, April 26, 2010 3:52 PM

Per the request April 14th, 2010, of the Department for more detail of our training and education programs, Southeastern Colorado RETAC is providing more specific detail to identify the types of training and education courses to be provided, the proposed dates/locations of those courses, and a detailed budget that reflects how these funds will be expended in terms of instructor support, travel, etc. We also will provide the specific reporting requirements related to the expenditure of this one-time funding opportunity in this year’s contract if approved. We want to ensure that our part of the contract is generated correctly and as expeditiously as possible.

FY2010-2011 Funding Request

Southeastern Colorado Regional Emergency Trauma Advisory Council, Inc. SECRETAC BACKGROUND INFORMATION ON PROJECT:

I. Education and Preparedness Training: The SECRETAC Biennial Plans, #4 (FY2009-11), since 2002 have identified the accessibility, affordability and quality of continuing education for prehospital care providers as one of the critical needs for rural and frontier regions. The annual

county plans that each of the six counties develops using a SWOT analysis also confirms these critical needs and reinforces the on-going search and need for Education and Preparedness Training. These specific courses addresses specific targeted areas of specialized training and education for EMS providers.

II. SECRETAC Council and the Clinical Education Committee provide the following recommendations for any additional RETAC funding on a priority basis: Four (4) Farm Medic Courses and a regional High Angle Rescue Course for FY2010-11 in our six county area. Courses have been developed and course budgets are provided. Upon successful additional RETAC funding for FY2010-11, SECRETAC would include these two additional Biennial Plan priorities based upon funding. SECRETAC will provide all documentation and financial and progress reports per the funding policies, procedures and regulations.

A. "Farm Medic" Course (4) Programs across the region in counties that did not receive one of the programs in FY2009-10): Courses will be scheduled quarterly across the region. Agriculture is one of the most dangerous industries in America. Each year, needless injuries and deaths occur to farmers, family members, farm employees, and rescue personnel. Emergency responders often lack knowledge of the nature of farm machinery, chemicals, and farm structures; in addition, some rescue techniques may actually increase the risk to the victim and rescue personnel. Training and education in the methods of farm/rural rescue are essential for proper response and safety of the rescuer and patient. The main goal of the National Farmedic Training Program developed by [Cornell University](#) is to provide rural fire/rescue responders with a systematic approach to farm rescue procedures that address the safety of both patients and responders. Those of us who have responded to a difficult farm emergency quickly learn that this type of call can be extremely challenging. Instead of a working in a kitchen - we find ourselves in a silo or grain bin. Instead of a highway - we find ourselves in a muddy field carrying our tools to the scene. Instead of easily removing wreckage from our patient - we find ourselves trying to work on machinery stronger than our own heavy rescue tools. We not only need to be concerned with the patient, but with the hazards that have injured and killed rescuers. Appropriate training in farm/rural rescue results in better patient outcomes and reduces the likelihood of rescuer injury or death. Some positive results of the National FARMEDIC Training Program are: shorter notification, response, and extrication times; improved first aid, EMS, and hospital care; and fewer rescuer injuries.

B. BUDGET : 4 Farm Medic Courses-Budget: \$18,000:

Provider Course (4 Sites: Bent, Crowley, Kiowa and Otero Counties):

Text Books/Certificates:\$45eachX20ea. \$900/courseX4=\$3,600

Instr.: (2) \$30 per hour @ 20 hours per course X 4 courses: \$2,400

Instr.: \$20 per hour @ 20 hours per course X 4 Courses: \$1,600

Travel: (2) four counties: Springfield base to counties: \$1,505

Equipment for hands on: 4X\$200=\$800

Delivery and clean up of Equipment: 4X\$300=\$1,200

Course enhancement materials and development: \$300X4=\$1,200

RETAC Coordinator Travel: 4 courses \$1,140

Food: 4X\$700=\$2,800

Equipment: 4X\$350=\$1,400

Farmer and Equipment Dealers: 4X\$25meal ticket=\$400

Total Budget: \$18,000

4 Farm Medic Courses: FY 2010-2011

	LOCATION	Bent County	Crowley County	Kiowa County	Otero County
EXPENSES					
Course Coord. / Instructor	\$30.00/hr	\$600.00	\$600.00	\$600.00	\$600.00
Asst. Instructor	\$20.00/hr	\$400.00	\$400.00	\$400.00	\$400.00
Travel Expenses	Room & Mileage	\$320.00	\$435.00	\$350.00	\$400.00
Course Texts/Certificate	\$45.00/Text	\$900.00	\$900.00	\$900.00	\$900.00
Equipment for hands on	\$200.00/Co urse	\$200.00	\$200.00	\$200.00	\$200.00
Delivery/Clean Up	\$ 300.00/Cou rse	\$300.00	\$300.00	\$300.00	\$300.00
Course Enhancement Material	\$300.00/Co urse	\$300.00	\$300.00	\$300.00	\$300.00
RETAC Coordinator Travel	Room & Mileage	\$310.00	\$275.00	\$285.00	\$270.00
Food					
Friday 1/Break	\$5.00 X20	\$100.00	\$100.00	\$100.00	\$100.00
Saturday 2/Breaks	\$5.00/20X2	\$200.00	\$200.00	\$200.00	\$200.00
Sunday 2/Breaks, sack lunch	\$5.00X20X 2/\$10.00X2 0	\$400.00	\$400.00	\$400.00	\$400.00
Equipment		\$350.00	\$350.00	\$350.00	\$300.00

Process: The Counties select a county planner, who then works with each agency to gather goals, objectives, and the costs to complete these goals. They then compile this and other information as required to complete each section of a county plan. Once completed, the plan is then reviewed and supported through signature of the county or designated fiscal agent, then it's reviewed and approved by their County Commissioners. The final step of the processes is a review by the SECRETAC Council to ensure that each plan is a valid plan, that each section has been addressed through instruction, and that it follow the established fiscal guidelines. Once each of these steps is complete, and they have completed the required deliverable, then an EMTS system will receive they're funding to support their now approved, "scope of work".

Each system is required to submit progress reports and fiscal spreadsheets that identify their expenses and a narrative to define the accomplishment of each item that they have used the funding for. This program has been a success in tracking expenses and the on-going improvements of the regional medical and trauma system. With any program there will be continued review and monitoring by the fiscal committee and the entire council. There is always "less" funding than is needed to complete their identified programs. This will provide data and analysis for any future increase in county funding levels.

Component 5-Human Resource Goal 1 Objective D Task 4: Regional Coordination

The SECRETAC Council continues to employ a Regional Coordinator who has managed day-to-day operation and programs. The Coordinator supports the SECRETAC Council and its efforts to improve this 6 County EMTS system. The coordinator also works with the agencies in providing technical assistance as requested. The Coordinator also works closely with the other regional programs and planners. The Coordinator also attends meetings at local, regional, and state levels to gain information on a multitude of subjects, and reports items back to the council.

Component 6: Communication Systems--Goals 1 – 6 and identified tasks: Communication system improvements

The SECRETAC Council members have been active in providing needs, research, and finding best practice to ensure a secure regional communication system. Now this may sound like all problems have been fixed, that we have purchased the needed equipment, and trained responders, but we have moved closer to the overall goal of seamless communication. There are still issues with bringing any system into a Region. As issues are identified they are brought to the Councils attention and addressed on a as needed basis.

Component 7---Clinical Education

Goal 5—Clinical Education:

Each county has identified goals and objectives that they have completed. Three counties; Crowley, Kiowa and Otero currently are supporting their Physician Advisor, Dr. Kevin Weber, as their medical director. Dr. Weber is also a medical director for several neighbor RETAC agencies and he and his staff provide continuing education throughout their contracted area. The EMS protocols adapted by Dr. Weber (Pueblo & surrounding area) originate from El Paso County (Plains to Peaks RETAC) and their original author Dr. Marilyn Gifford. The Council has approved the coordinator to seek additional funding for the “Pilot EMS Medical Director” program for the region. Future funding, 09-10 may be available through the CRHC Critical Access Hospital Program and SECRETAC will work with the CRHC to identify possible programs. Other options may be with the non-designated EMTS Provider Grants Funds or reversions. This will be discussed at the state SEMTAC Committee level in June 29, 2010.

The next paragraph is a new goal (10.7.) that was identified from new funding program that has helped agencies and communities provide better access and response to cardiac arrest victims.

From the regional Level the SERETAC Council has work with the Colorado Rural Health Center to bring Automatic External Defibrillators (AED) to rural and frontier communities to increase response resources for heart attack victims. This region has place 49+ AED within communities, Fire Departments, Ambulance Services, Law Enforcement vehicles, Community buildings, and civic organizations. These units were placed to enhance response area and key locations with high population to improve the time to shock and increase survivability percentage of these patients. Additional Federal Funding is being explored through the CRHC AED Program to expand the program to public schools in the region. If funding becomes available, SECRETAC will develop a long term plan, distribution, data tracking and AED maintained and education for the program. As mentioned previously, the CRHC approached and the SECRETAC Council approved a support letter to CRHC for new potential AEDs funds. Progress will be reported as received.

Components 12 & 13 – Public Education/Injury Prevention-1st Yr. Completed

The CDOT Enforcement Enhancement Grant: FY09-12. Will provide a three year grant, at approx. \$75,000 per year for a pilot program for SECRETAC. The Pilot program in the first year is to build a countywide coalition to develop a model program for the study and to find the best practice in increasing seatbelt usage throughout a county in a rural setting. The first year will also develop an intervention plan that set out a propose course of action to increase seat belt usage in the second year that includes both media and law enforcement participation.

The evaluation will be done and will provide a summary report to the grantor and the council.

The Coalition has continued to work in the building of the coalition membership who has provided recommendations that this program focus their effort in the education of the public through media events, national CIOT program, Civic and Community Events, support of the local, county, and state law enforcement. The Council has approved an Injury Prevention Committee to work with the coalition and upon successful notification of the CDOT EE Grant application (notification in Oct 09). The committee will provide recommendations and provide technical assistance to the coordinator in the implementation of the grant.

The Coordinator applied for an EMTS Provider Grant in Injury Prevention with a 50% match from the Colorado Rural Health Center and both were approved for a \$10,000 Child Passenger Safety Technician Training Program for SECRETAC in August 2008. The goal is to train over 9 technicians and provide them with tools, resources, and seats for regional child-passenger seat safety stations. Over 100 child passenger safety restraint systems have been purchased and will be distributed throughout the region in FY09-2010, Child safety seat “Check Stations,” will be provided throughout the region in FY09-2010. The new Safe Communities Coordinator and the SECRETAC Coordinator applied for EMTS Provider Grant Funds, Cycle I, was notified June 29, 2010 for a \$10,000 Child Passenger Safety Technician Grant with a 50/50 match approved by CDOT. As soon as award approval is received, program will be advertised and implemented for FY2010-11.

COMPONENT 14 INFORMATION SYSTEMS

Goal 1 Objective A; Goal 3, Objective a Task 1: County plans

The accomplishment of these goals was to develop a program that can gather information about the agencies and EMTS systems with the SE Region, on an annual basis. The information within these county plans provide key information about the health of their system, needs, assessments, and planning goals to enhance area(s) that they define through cooperation from each of their response and non response agencies.

This information that is proved on an annual basis is the key work and foundation of what is being accomplished within this region annually. The counties through this funding program also provide reports on a quarterly basis that provide oversight on what has been accomplished and/or any threats that have impacted their system.

Each agency provides an annual “Agency Profile,” to the EMTS Office. The profile and the required (by the state EMTS Office, rules and regulations) prehospital care trip reporting system “MATRIX” provides the “minimum data set” required by the state and the National EMS Data

System (NEMESIS) to the state on an, at minimum, quarterly basis. The Coordinator, who has regional access to all EMS transport agency data, provides data reports to the council and the committees. Data is analyzed for quality, regional issues, clinical practice issues and specific issues identified by committees. Each EMS Transport agency in the SECRETAC region is required by the RETAC to maintain an yearly update of the states Matrix Agency Profiles. Each calendar year, in January a report is provided to the Council. Agency Profile maintained is one of the SECRETACs criteria for each county's EMS Funds along with the review and approval of their County Plans. Per a successful review and approval funds for each county by county are approved and released per county in two bi-annual payments; January and July.

Component 15 Evaluation---Goal 1 Objective A Task 1

Development of system analysis through a S.W.O.T.S. assessment. See completed S.W.O.T.S. as located within each county plan as defined in attachment A – County Plans.

The Council will use these assessments to better identify threats and to advise corrective actions to those systems who are impacted. Also to pass on issues from these plans to the state to help locate resources or expertise to correct items the stakeholders identify that.

Counties have been utilizing the SWOT assessment format for the past eight years. The patterns and the key issues have been identified and addressed within each county plan submitted to the council for review and approval. These SWOT analyses have provided a key component to the development and implementation of the Biannual Plans. County Plans are also provided for the public on the <secretac.org> web page.

Goal #1 Communication Systems

Introduction:

The threat to the communications system for this region is first identified as Goal #3 MCI and has been completed. The focus and concern for the future is the changing FCC Regulations and the resulting fiscal impact to this rural region. As these changes occur, this Region will be forced to update identified communications equipment to meet new requirements and ensure Regional Communication system interoperability. Needs and opportunities are identified and brought the Councils attention at the quarterly meetings. Review and Action plans are identified as needed.

Objective

The first Objective to meet this goal is for the Chairman of the Council to assign the following tasks to the Communications Committee: Completed.

- Update the Regional needs assessment relating to communications
- Identify in this assessment incompatibilities in the Region
- Develop a Master Template for a Regional Communications System
- Develop system wide timelines and funding programs to meet the Objective.

This committee continues the work it started in the initial years that included support from Agency Directors, Administrators, and other key organizations. The tasks above have been completed through a series of open public meetings as scheduled by the committee. This meeting's began long-term work is projected to start on or about 1 July 2005 and completed NLT 1 Jan 2006. Completed.

The second Objective and Task for this committee was complete and implement the recommendations and timelines as approved by the Full Council and Stakeholders no later than the proposed date of 1 Jan 2007. Completed, see Meeting Minutes SECRETAC Council, also available on the <secretac.org> web page. Also hard copies are available upon request within thirty days notice.

The key part of this task for the Communications Committee, with the assistance of all Stakeholders through identified meetings, is the completion of the master template and identifying and securing funding sources to ensure the success of this Regional communications system upgrade. Completed.

The Full SECRETAC Council will monitor and measure the progress of this Goal through a series of reports to the Council from the Communications Committee. An End of Action Report will be used to measure the full outcome of this Goal. Issues and needs are brought to the councils attention at the quarterly meetings. Council identifies needs, resources and previews review and evaluation from all actionable items.

GOAL #2 Education Systems

The following Objectives will focus on mitigating and enhancing this educational Goal. Note: The timeline for this Goal may be adjusted to an earlier date if Goals or Tasks in the first two years are completed.

Objective

The first Objective is for the Chairman of the Council to form a Committee to address the issues relating to Educational Systems. This committee will be appointed by members of the Full Council and will include identified system Stakeholders, Directors of Training Centers and Groups, or other identified organizations. This Committee will be in place NLT 1 July 2005. Completed.

The first Task of the committee is to sponsor a series of open public meetings to collect data and information regarding the health and the status of all educational programs, including training centers and groups. This process can be conducted through direct and indirect means as recommended by this committee. The projected completion date for this Task is NLT 1 Oct 2005. Completed.

The second Task for this committee is to compile, review, and formulate a report on the current health of the Regional Educational Programs system-wide. From these results, the Committee will develop recommendations to upgrade, improve, and enhance the educational programs in this Region. Committee recommendations should address issues relating to the cost per student, quality of product, financial assistance programs and/or funding sources, and the quantity of programs that meet the needs of the Professional EMST provider. The projected completion date of this Task is NLT 15 Jan 2006. Completed.

The third Task of the Education Committee and the Full SECRETAC Council is to approve and implement those Committee recommendations that enhance and provide Regional and integrated programs for initial and continuing education of EMS professionals. This Task will be monitored for years to come and will be adjusted by the committee and Stakeholders to ensure the success of this Goal. The final report prior to implementation of the committee's recommendations is projected to be NLT 1 March 2006. Completed.

The Full SECRETAC Council will monitor the committees' progress and measure the outcome of its work through a series of reports to the Full Council, and at the conclusion of the final report to be completed NLT March 2006. Completed. On-going monitoring and evaluations are provided on a quarterly basis through the Clinical Education Committee and reports to the full council at the quarterly Council meetings, held annually. Clinical Ed. Committee reports and meeting minutes are available through the <secretac.org> web page. Hard copies are available upon written request with a thirty day reply period.

Goal #3 Informational systems

Introduction

Informational systems are the key components required to address and foster solutions for many issues in the areas of public education, injury prevention, system enhancement, and overall evaluation of this EMST Region.

Data collection is and will continue to be a critical tool for improving patient care, analyzing clinical strategies and implementing injury prevention programs. Data provides insight into trends, patient outcomes, and statistical information on the effectiveness of the care provided in this Region. It also provides the key component for systems and agencies to monitor themselves through Continuous Quality Improvement (CQI) programs.

Note: The timeline for this Goal may be moved forward as other goals are completed and/or with changing priorities in this SECRETAC Region.

Objective

The first Objective is for the Chairman of the Council to create a committee comprised of Agency Directors, Administrators, Facility representatives and/or other identified organizations, to assist with a series of public meetings that address the identified tasks. The committee should be established on/before 1 July 2005. Completed.

The first Task to meet the Objective will be to review past information, gather new data collection products, review other systems that are currently in place, and make recommendations regarding the creation or purchase of a Regional Data Collection Program. The committee will work with all Stakeholders and the State Department of Health –IP and EMTS Offices to ensure that the program selected is compatible with and meets informational requirements set forth by CDPHE. The evaluation and selection process will be accomplished through scheduled open public meetings at location TBD, and will include all committee members, Stakeholders and/or invited guests. This task should be completed NLT 1 Jan 2006. Completed.

The second task for this committee was to provide, secure, or locate funding sources to purchase and implement the recommended program throughout the Region. Funding should encompass the costs for all software, hardware, system wide user training and yearly maintenance for the continued upgrade and potential system problems. This Goal should be completed and implemented NLT 1 Jan 2007. Completed.

Note: The second Goal will be completed in the same time frame as the first task, but a later completion date is scheduled to accommodate expenditure restrictions for Grants and other funding sources, as well as time required to install, train personnel, and test the system. Funding and purchase/creation of the Data Collection System should be completed in the year 2006, and the system online for the next full reporting year in calendar year 2007. Completed.

Full reports at SECRETAC Council will provide the monitored progress of this Goal and completion will be measured when the Region office collects the first stream of data and forwarded to the State. Completed. Available on the <secretac.org> web page.

Conclusion of Overview

Section Six has provided the critical threats or Goals that this region will be working on to enhance this Regional EMST System over the next two years and beyond. Timelines and priorities in this section will remain flexible. As Goals, Objectives and/or Tasks are completed; new ones will be brought forward. As critical needs and/or threats change, long-term Goals, Objectives, and Tasks will be re-prioritized.

The Biennial Plan for SECRETAC is viewed as a living document that offers guidelines for development and enhancement of this EMST system and its agencies. As such, Goals, Objectives, and Tasks may be re-prioritized to meet the critical threats to the Region, but system enhancement and quality of patient care will remain the foundation of this EMST system.

Section 4: Attest Statement

ATTEST STATEMENT

Biennial Plan Update

By signing below, the RETAC Chairperson and the RETAC Coordinator attest that the information contained in this document, to the best of their knowledge, completely and accurately represents the most current information available to complete the revisions to the RETAC Biennial plan. The goals and objectives incorporated herein have been reviewed and agreed upon by the RETAC Board of Directors to be included in this document.

Print Chairperson Name

Chairperson Signature

Signature Date

Print RETAC Coordinator Name

RETAC Coordinator Signature

Signature Date

Appendix

Supporting Documents

Attachments

- A. SNAP SECRETAC**
- B. Approved Increase SECRETAC Funding: FY10-11**
- C. County Plans FY10**
- D. K Financial Draft Audit**