

COUNCIL NEWS

Working Together to Build A Better Tomorrow

October 2015

Welcome Fall!!!!

The leaves are starting to change... the air is crisp and the temperatures are starting to fall... It's autumn...

The autumn comes with it's own set of health concerns and injury risks... flu season begins, Halloween characters in all sorts of costumes Trick or Treating in the dark, and the health risks associated with outdoor work, like raking leaves and mulching...

*"This calling to give of myself
Most do not understand
But I stand ready all the time
To help my fellow man.."*

The EMS Prayer

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From the Executive Director

Anyone know where summer went? I vaguely remember sitting in school wondering when the day was going to end...the school year went even slower. Everyone said “Wait until you grow up”. How True!

A few things that have crossed my desk or been on my mind over the past several weeks.

❖ **October 15th is the annual Council meeting. This year’s meeting will convene at 18:30 at the Bald Eagle Area Middle/High School in Wingate, PA. The meeting is open to the public and all agency delegates are encouraged to attend.**

❖ **Commonwealth Budget. As I write this the Commonwealth has gone without a budget for 94 days and there is currently no compromise in sight. With no budget, Council hasn’t been receiving any funding. The Board and I have been crunching numbers to ensure continuation of service to the regional agencies and providers and have, reluctantly, found we are at the point of needing to furlough staff. Effective October 1, 2015 staff will be assigned rotating, two-week furloughs to help in dealing with this financial situation prior to it becoming a crisis. Other cost savings measures will also be instituted such as decreased un-mandatory travel and non-emergent purchases. I ask that you please understand the situation and work with us throughout this slowdown. We are all committed to making sure this impasse has little to no effect on essential EMS operations throughout the Region. Thank you for your cooperation and understanding.**

❖ **EMSVO. EMSVO is now a certification level issued through the Dept. of Health. There has been some confusion that I hope to clear up:**

EMS drivers, upon completion of an approved EVOC course, must apply for EMSVO certification with the Dept. of Health. Initially, to get current drivers into the system, the Department allowed EMS agencies to forward a roster of all current drivers, who met the EMSVO requirements, to the regional councils; that information was then entered into the registry system. Currently providers need to complete the DOH application and forward it to the regional council. If you are unsure whether you are a recognized EMSVO driver, please check your record on the DOH registry system – the “EMSVO” box should be checked if you are currently registered.



From the Executive Director

If “EMSVO” is the only certification you hold through the Department of Health, an “EMSVO” certification card will be issued.

If you hold another DOH certification, an “EMSVO” endorsement will be included on your provider certification card the next time you re-register that certification.

For example, I have an Emergency Responder card with an expiration date of 1/1/2016 and just forward the required EMSVO paperwork to Mark today. I will be a recognized Emergency Responder AND EMSVO within a day or two, but my card will not have the EMSVO endorsement until I re-register (recertify) my Emergency Responder on 1/1/2016. This will only be an issue for the next, roughly, eighteen months at which time all currently registered EMSVOs will have a card showing that endorsement.

Similar to your provider certification, continuing education requirements are referred to as yearly; but, looked at as a registration period. For example my EMT card, issued on 1/1/2016, has the EMSVO endorsement. I can “frontload” three hours of EMSVO Con-Ed prior to June 2016 OR not do any EMSVO Con-Ed until December 2019 – either way, as long as I successfully complete three hours of EMSVO Con-Ed prior to midnight on December 31, 2019; I am an emergency medical services vehicle operator throughout the period – 1/1/16 to 12/31/19 – and the card issued for my 2019 re-registration will also have the EMSVO endorsement. Agency managers do not need to track EMSVO Con-Ed on a yearly basis to verify compliance with the EMS Systems Act.

EMSVO certification is required of anyone who operates ground EMS vehicles for an EMS agency. Individuals who operate exclusively for a QRS agency need to complete the process to be recognized as an EMSVO provider; but are not required to complete the continuing education necessary for re-registration.

I’ll end with that.....Have a wonderful fall and enjoy the season! I again thank you for all you do for the residents & visitors throughout the Region and extend my sincere offer to assist you as I can – feel free to contact me. Hard to believe the next time we will be talking will be January 2016..... So.....



Happy Thanksgiving and Merrrrrry Christmas!!!



Licensure

**The Following Services are due for relicensure by
January 1st, 2016 - contact Jim Urban to begin this process as soon as possible:**

- ★ Bellefonte EMS
- ★ Centre LifeLink EMS
- ★ Central Juniata EMS



- ★ FAME EMS
- ★ Milroy Hose Co EMS
- ★ Mountain Top Fire Co.

The Intermediate Advanced Life Support (IALS) Ambulance and Squad equipment list was just published in the Pa Bulletin (45 Pa.B. 6022) on Saturday October 3, 2015

<http://www.pabulletin.com/secure/data/vol45/45-40/1773.html>

The Bureau is continuing to work on the redevelopment of the electronic licensure application process, and as such, the application process will be handled differently. EMS Agencies that wish to be licensed at the IALS level should do the following:

1. The agency must log in to their current EMS Agency Licensure account in the EMS Portal, and complete an amendment.
2. In the staffing / response plan the agency must indicate that this application will be to amend the license to the IALS level and explain how they plan to provide IALS coverage.
3. In the vehicle section identify the vehicles they will operate as an IALS Squad or Ambulance.
4. The agency must prepare on their letterhead a letter to the EMS Regional Council stating that they are amending their license to the requested licensure at the IALS level.
5. They must pass an inspection of the IALS equipment and training certificates.

REMINDER:

ALL BLS Ambulances are required to carry Aspirin effective July 1, 2015 per BLS protocol 501: Chest Pain.

Please make sure to stock aspirin on ALL BLS vehicles

Halloween Safety!!

- ☆ Any "weapon" used with your costume such as swords, knives or any other "sharp" accessory should be short, soft, and flexible to avoid injury
- ☆ Avoid Trick-or-Treating alone! Walk in groups or with a trusted adult
- ☆ Place reflective tape or battery-operated flashing lights onto costumes and bags so drivers can see you
- ☆ Examine all treats for choking hazards and tampering before eating them. Limit the amount of treats you eat.
- ☆ Hold a flashlight while trick-or-treating to help you see and others see you.
- ☆ Look both ways before crossing the street and use crosswalks when available
- ☆ Lower your risk of eye injury by not wearing decorative contact lenses.
- ☆ Only walk on sidewalks whenever possible, or on the far edge of the road facing traffic
- ☆ Wear well fitting costumes, masks, and shoes to avoid blocked vision, trips and falls.
- ☆ Eat only factory wrapped treats. Avoid homemade snacks from strangers.
- ☆ Only go into homes of people you know. Never without an adult and ONLY go to well lit homes.
- ☆ Never walk near candles or luminaries and wear a flame resistant costume.



It's The Great Pumpkin!!!! Well, maybe not... but it IS one of the most exciting times of the year!! Take our quiz about Trick or Treat Safety!!

1. Which of these are the most common types of Halloween Injury?

- A. Eye Injuries
- B. Burns
- C. Pedestrian Injuries
- D. All of the Above

2. The first popular Halloween candy in the United States was....

- A. Hershey Kiss
- B. Peanut Butter Cup
- C. Tootsie Roll
- D. Snickers Bar

3. One of your child's candies has something suspicious in it. What do you do?

- A. Forget it. It's probably nothing
- B. Call the police. If there's one there's more
- C. Just throw it away. It's only candy
- D. Bite into it and see what it is.

4. A 10 year old boy returned from trick or treating and just couldn't resist biting in to that candy! He ate a few pieces and went for a shower. When he came down he couldn't speak and was having trouble breathing. You find a tootsie roll wrapper, a Hershey bar wrapper, and a Snickers bar wrapper in the kitchen. What do you suspect and what is the first question you ask of his mother, who is the one who called 911.

QUIZ ANSWERS:

- 1. D. All of the Above - these are all common injuries that occur this time of year.
- 2. C. Tootsie Roll
- 3. B. Call the Police - If your child got one, there's a good chance others in the neighborhood did as well
- 4. Anaphylaxis - Is he allergic to peanuts? (Snickers bar and VERY common childhood allergy)

From The Regional EMS Education Coordinator

Assisting everyday in an ever changing EMS System

As the summer officially comes to an end and fall begins, things here continue to move at a rabbits pace.

Every day I am receiving phone calls and emails from providers stating they don't understand the changes to the EMS system and/or the new coned processes. In an effort to assist our providers, I am planning to offer webinars on a monthly basis. I have been reviewing my schedule and, at this time, I am looking at doing 2 webinars a month at 2 different times of the day, with the hope that those who are paid and those who are volunteer will be able to attend as their schedule allows.

The focus point of the first webinar will be to assist EMS providers and managers with the educational components we commonly use, such as the LMS (Centre Learn System) and the Pa Department of Health Bureau of EMS Registry (BEMS site), and all of their functions. The EMSVO certification and all coned requirements will also be discussed.

As everyday seems to be a new day, and new things are released, I truly want all providers to have the comfort of knowing what they need to do to maintain their EMS certification. I also hope that they will have a full understanding of the EMS educational structure and how to access all of the tools provided to you by the Bureau of EMS, the Regional Council, and its staff.

2015 Protocols

The 2015 Protocols for all certification levels have been released and are currently posted on both the Bureau of EMS home page, and the Council home page. Please see below the implementation dates and educational requirements for the 2015 Protocols:

- ✧ BLS Protocols - July 1st, 2015 - Education course available on the LMS System
- ✧ AEMT Protocols - July 1st 2015 - No additional education available at this time
- ✧ ALS Protocols - October 1st 2015 - Education course available on the LMS System
- ✧ Critical Care Transport Protocols - April 2nd 2015 - No additional education at this time

Miscellaneous Comments

- ✧ CPR- Your CPR certification must be up to date and listed on your profile on the Pa DOH BEMS portal, if the CPR certification on your registry is NOT up to date, please fax or email a copy of your card with your certification number to the office.
- ✧ Lapse of Registration- If your EMS Provider certification has lapsed for any level, the process to recertify has changed. You must now, at a minimum, take the National Registry Assessment exam at your expense. Please take the time to review your account on the BEMS portal to be sure that you have earned enough credits prior to your expiration date.

Documentation in the ICD-10 World

Unless you have lived completely under the rock of the health care world, I'm sure you've heard that the 30 year old coding system, ICD-9, used to bill for prehospital and hospital services, has been completely revamped and renamed. Medical services and billing companies began using the ICD-10 codes on October 1st, 2015, and if you haven't made some changes, now may be a good time to start.

I'm not a billing company, I'm an EMS provider, why do I care about codes? Because precise coding and diagnosis billing is what gets your transports paid for. It's what keeps you going. It's about the bottom line. There are now 68,000 (yep, that's three zeros, I'm not just excitedly typing) ICD-10 codes compared to the 13,000 in ICD-9. There are more to choose from, therefore, more precise billing issues. So, as an EMS provider, this means you must document more precise narratives, and more detailed descriptions of illness, injuries, and symptoms.

Let's start with injuries:

ICD-9 was broad based. You could document a "leg injury" from a car accident, and it was ok, because the coding number for a leg, knee, ankle or foot were the same. But now, that one code for all those injuries has expanded into several different codes. There is specified or unspecified injury. Specified or unspecified limb, ankle, knee, foot, lower leg... yep, they all have their own codes now. Location is equally important. A basic "leg injury" should now be documented more precisely and accurately... what type of injury and where it's located on the leg is VERY important! Is it a laceration? A contusion? A burn? And where is it? On the calf? On the thigh? On the foot?

Think back.... Remember all those terms you learned a LONG time ago.... Distal, medial, proximal, superior, inferior, anterior, posterior.... You might want to brush up on those.... The documentation is THAT specific.

THAT is the take home point here – PAY ATTENTION TO DETAIL – the more you can specify about the illness, the accident, the injury, and the symptoms, the better.... Even the location of the incident is important...(Don't worry, if someone gets hurt in the library, at the Opera or even in the prison swimming pool, there's a code for that.) DETAIL, DETAIL, DETAIL....

As much as we have referenced the billing aspect of the ICD-10 codes, it's not just about the money – the ICD-10 codes were developed with more specificity to better collect data, and to prevent further injuries, illnesses and deaths.

Now, onto illness:

ICD-9 again, was broad based. You could document "abdominal pain" and there was a code for that. Now the single "abdominal pain" code includes abdominal pain with vomiting, abdominal pain with fever, and not to mention, again, the location of the pain. Specified, unspecified, and the description of the pain as well... sharp, stabbing, dull, constant, cramping, and the list goes on and on...

So remember, the better your documentation the better the overall outcome, not only for your billing purposes, but for data collection as well. Remember to always follow the "Who, What, When, Where, Why and How" method of writing -

Documentation in the ICD-10 World

WHO – Always document “who” in the incident was involved – driver? Passenger? Back seat passenger side? Back seat driver side? Third row passenger? Or in the case of a medical call, a description of the patient... Child? Elderly? Male? Female?

WHAT – Remember to document exactly WHAT happened – For example, a car accident: what kind of car? What type of impact? What kind of damage? What direction of travel? - Or in the case of other types of incidents... bitten by a sea lion? Struck by a duck? Struck by an Orca whale? Again... the codes are PRETTY specific (and yes, those ALL exist as REAL billable codes...)

WHEN – When did the incident happen or how long have the symptoms been occurring? Morning? Night? Afternoon? Dawn? Dusk? – Chest pain for 1 hour? Leg pain for 3 days? Headache since last night? Those type of specifics are also important.

WHERE – Where exactly did the incident take place? There are SPECIFIC codes for locations of incidents? Home? School? Playground? Highway? Rural road? Farm? Library? Opera? Prison swimming pool?

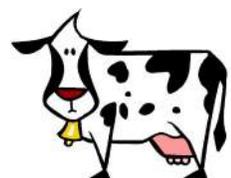
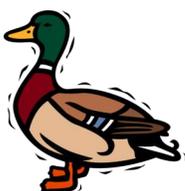
WHY – do you have specific reason WHY the incident happened? Swerved to miss a deer? Swerved to miss oncoming vehicle? Texting? Fell asleep? Got too close to that orca whale? Lightning struck..... Twice? (Yes, there is a code for a lightning strike, subsequent encounter..... just in case you're that unlucky)

HOW - How it happened – again, the mechanism is important – was it weather related? Was it lack of attention? How did they get that close to an Orca whale in the first place?

Remember, I can't stress enough to be specific – and when I say specific, I mean SPECIFIC – bitten by a cow? There's a code for that... Pecked by a chicken? Yep, code for that too.... Get burned because your water skis were on fire? We can handle that....Sucked into a jet engine.... For the second time? We got you covered... Incident in a spacecraft that caused injury to the occupant? Believe it or not..... There's a code for that too....

Yes, we added some humor to this article, but coding and billing is no laughing matter – accurate billing and subsequent payment for our services is what keeps us here, keeps our doors open and allows us to respond to emergencies day in and day out. We may encounter some crazy things now and then, but rest assured, even the calls you couldn't make up, are included in the newly released ICD-10's...

For more information on ICD-10 billing and documentation contact your billing company...



MEET THE STAFF

Mark Wolfgang

Regional EMS Education Coordinator



What is your job at the Council?

EMS Education Coordinator—My main job area(s) are circled around Certification of Prehospital providers to include both initial EMS certification courses and continuing education courses. I am the regional lead for maintaining up to date information and processes for all certification levels and the State EMS Registry. As with all staff positions, there are multiple other tasks that I assist with and/or take the lead on with situational dependence.

What do you like most about your job

I don't think I can say there is one thing about my job I like most, with any job there are good things one day, and even better things the next. I truly do enjoy the traveling around and meeting all the providers within our 9 county region, and getting to experience the joy and pride that the providers and agencies show when we get to interact on their "home turf"

How many years are you in EMS?

This year has marked my 18th year being associated with EMS as a whole, and 19 1/2 years in Emergency Services.

Do You Currently Work or Volunteer in EMS?

Yes, I currently run as an EMT with Milroy Hose Company #1 EMS as well as run on medical assist calls within our fire departments first due area, especially as a Rescue Company providing EMS care until arrival of our local first due EMS agency

MEET THE STAFF

Mark Wolfgang

Regional EMS Education Coordinator

Why Did You Get Into EMS As A Career?

In all honesty, I had joined my local fire company, Milroy Hose Co. #1 to fight fire, after a close friend who I got to know at a local garage peeked my interest. The Milroy Hose Company is a Fire/EMS based agency. After roughly 1 year of "just" being a firefighter, I quickly realized that the pager didn't activate nearly as much for fire as it did for EMS calls. So I asked Todd what I needed to do to start to run EMS calls, and he quickly started me out in my training, first achieving EVOC so I could drive during the day for our two EMT paid staff, which then required me to become an Ambulance Attendant. I then obtained my American Red Cross Emergency Responder Course in the spring of 1997. Shortly thereafter, I talked my brother into taking the local EMT course at the State Fire Academy with me completing in 1998. From there I could say that my EMS career bloomed to a will and want to help people and some great mentors and friends that encouraged me and pushed me all the way. I wouldn't be where I am today without Todd and Mr. & Mrs. Gramley, whom have been my biggest mentors and friends in EMS.

What Is Your Favorite Thing to Do Outside EMS?

I would say that I am a simple person, but I don't have just one thing outside of EMS that is my favorite. I truly enjoy spending time with my family and my kids for sure. Typically we can be found either in the woods, at a local dirt track, or on the water fishing. Sometimes, the best times are sitting at the house beside the fire pit just hanging out. You won't find me in the City, but look hard in the mountains, and we may cross paths.

What Was Your Biggest Challenge In Your EMS Career?

As for my biggest challenge in this EMS career, was gaining the respect of everyone, I truly started out this career at the Council at a very young age (so to speak) and working with providers that I looked up to and respected as well as my EMS mentors was a nerve racking experience, but after a short amount of time things just began to click and all was good.

What advice would you give to someone beginning a career in EMS?

Take time to make sound decisions from the start throughout your entire EMS career no matter what level or paid verses volunteer. EMS is a big step, and taking your time is the best. All too often we see folks jump head first in, and in a 3 year time have just burnt themselves out or had a bad experience. People in need will always be there, pace yourself and find the true enjoyment of being involved in EMS.



These recipes and more available at:

www.eatingwell.com

SIMPLE "ON THE GO" SNACKS AND MEALS FOR EMS



Crunchy Granola Wedges

INGREDIENTS:

- 1 cup rolled oats
- 1 cup wheat flakes
- 1 cup sunflower seeds OR chopped nuts
- 1/2 cup honey
- 1 cup dried cranberries
- Pinch of salt.

PREPARE:

1. Preheat oven to 400° F
2. Spread oats, wheat flakes, and seeds (or nuts) on a baking sheet. Bake until fragrant and starting to brown.
3. Coat 9" pie pan with cooking spray. Cook 1/2 cup honey in large saucepan over medium-high heat without stirring until large foamy bubble form and it starts to darken at the edges.
4. Immediately pour the toasted mixture into the honey. Add cranberries and salt until coated. Quickly press the mixture into the pie pan with spatula coated in cooking oil. Allow to cool 30 minutes and cut into wedges

279 cal, 9g fat, 0mg cholesterol, 47g carbs, 27g sugar, 6g protein, 5g fiber, 20mg sodium, 153mg Potassium



Chocolate Banana Grahams

INGREDIENTS:

- 1 Square Graham Cracker broken into 2 rectangles
- 1/2 teaspoon Nutella or other chocolate/hazelnut spread
- 2 slices of banana about 2" long
- 1/2 teaspoon shredded coconut, toasted if desired, divided

PREPARE:

1. Spread each graham cracker with Nutella and top with a slice of banana and a sprinkle of coconut

71 cal, 2g fat, 0mg cholesterol, 13g carbs, 4g sugar, 1g protein, 1g Fiber, 46mg Sodium, 94mg Potassium



No Bake Broccoli Mac and Cheese

INGREDIENTS:

- 8oz whole wheat elbow macaroni (2 cups)
- 1-10oz package frozen chopped broccoli
- 1 3/4 cup low-fat milk; divided
- 3 Tablespoons flour
- 1/2 teaspoon garlic powder
- 1/2 teaspoon salt
- 1/2 teaspoon ground white pepper
- 3/4 cup shredded extra-sharp cheddar cheese
- 1/4 cup shredded parmesan cheese
- 1 teaspoon Dijon mustard

PREPARE:

1. Bring large pot of water to a boil. Cook pasta for 4 minutes. Add frozen broccoli and continue cooking, stirring occasionally, until the pasta and broccoli are just tender.
2. Meanwhile, heat 1 1/2 cups milk in another large pot over medium-high heat until just simmering. Whisk the remaining 1/4 cup milk, flour, garlic powder, salt and pepper in a small bowl until combined. Add the flour mixture to the simmering milk. Return to a simmer and cook, whisking constantly, until the mixture is thickened. Remove from heat and whisk in cheddar, parmesan, and mustard until cheese is melted.
3. Drain the pasta and broccoli and add the cheese sauce. - Return to heat and cook, stirring over medium-low heat until heated through (approximately 1 minute)

412 cal, 13g fat, 37mg cholesterol, 56g carbs, 22g protein, 7g fiber, 640mg sodium, 236mg Potassium

Preparedness Corner

Philadelphia Papal Visit 2015

The weekend of September 26th has proven to be one of excitement, and for a select few EMS providers and thousands of faithful, a once-in-a-lifetime experience, not soon to be forgotten. For the first time since Pope Benedict in 2008, and the first time ever during the World Meeting of Families, the Holy Father, Pope Francis, visited the United States, and held masses in several large US cities along the east coast.

The visit, coinciding with the World Meeting of Families, drew thousands of faithful to the City of Brotherly Love to catch a glimpse of Pope Francis. Knowing this would put a great strain on the Emergency Services in and around the City of Philadelphia, the call was put out to all EMS agencies across the Commonwealth to assist Philadelphia for the weekend. Four agencies from the Seven Mountains EMS Council Region answered the call.

- ✚ **Americus Hose Company Ambulance, Sunbury, Northumberland County**
- ✚ **Berwick Area Ambulance Association, Berwick, Columbia County**
- ✚ **Lack Tuscarora EMS, East Waterford, Juniata County**
- ✚ **Union County West End Ambulance, Millmont, Union County**

Each agency sent one truck and four providers to the event. They were deployed Friday and returned Sunday. They worked around the clock in 12 hour operational periods, supplementing the Philadelphia Fire Department as thousands of people made their way into the city along the Ben Franklin Parkway to listen to the Pope's mass. They assisted the Philadelphia Fire Department in any capacity which was asked of them.

Along with the above listed agencies, two council staff members, Director Tim Nilson and EMS Preparedness specialist Howdy McGinnis spent several days prior to the Pope's arrival setting up the MSECs and CCP trailers and getting the city ready for the biggest National Security event in Pennsylvania. Matthew Abbey and Terry Wolford, regional EMS providers, also made the trek into the city to serve with the Medical Reserve Corps for those three days.

The Seven Mountains EMS Council Thanks these agencies, providers, and council staff members for proving that our region will always lend a hand when necessary to a community in need!!!

Conference Update

SAVE THE DATE!!!

SPRING CONFERENCE 2016

March 18th-20th, 2016 — Pine Barn Inn Danville

Here are some things to look forward to:

- **The 2016 Keynote Speaker will be Deputy Chief Ken Bouvier from the New Orleans EMS!!!**
- **Basket Raffle : Due to great success last year, we will again be doing the raffle - This years donations will go to the National EMS Memorial Foundation**
- **You asked, we listened! Returning this year are some of your favorite speakers!**
- **EMS Awards and the Jack Williams Award will be given again this year! Get your nominations in! The nomination forms are on the following pages!**
- **Brochures will be available soon!!**



Keep an eye to the website for more information as it becomes available!!!!

2016 EMS Awards



The Seven Mountains EMS Council is proud to again present EMS Awards in conjunction with the 2016 EMS Conference. The following awards are available to be presented. Please use the nomination form on the following page to nominate a provider/

agency for the following awards:

Distinguished Provider Award:

- ✚ **The Distinguished Provider Award is presented to an ALS or BLS provider who is currently in good standing with the PA Department of Health and has made a significant contribution in the performance of duties or advancement of EMS.**

Distinguished Agency Award:

- ✚ **The Distinguished Agency Award is presented to an EMS Agency whose license is in good standing with the PA Department of Health and has made a significant contribution to the growth and development of EMS in their community.**

Distinguished Service Recognition:

- ✚ **The Distinguished Service Recognition is presented to an EMS Dispatcher, Educator, or Administrator who has made a significant contribution to the advancement and/or development of EMS in the Region.**

Distinguished Community EMS Recognition:

- ✚ **The Community EMS Recognition is presented to a non-EMS affiliated community member who provided life-saving care in an emergency situation (i.e. provided bystander CPR until EMS arrived)**

Distinguished EMS Partner Recognition:

- ✚ **The EMS Partner Recognition is presented to an EMS partner, such as police, firefighter, lifeguard, etc. who performed life-saving action until EMS arrived, and/or made significant contributions to EMS partner relations.**

2016 Jack Williams Memorial Award



We are currently accepting applications for the annual “Jack Williams Memorial Award.”

The Jack Williams Award is provided by the family of Jack Williams to memorialize their father who was an active EMT and officer with Shimer and Fifth Ward Hose Companies in Milton and an EMS Training Officer for the Milton Ambulance Service. Mr. Williams also served the community and region as an EMS instructor and Susquehanna EHS Council board member for more than 20 years.

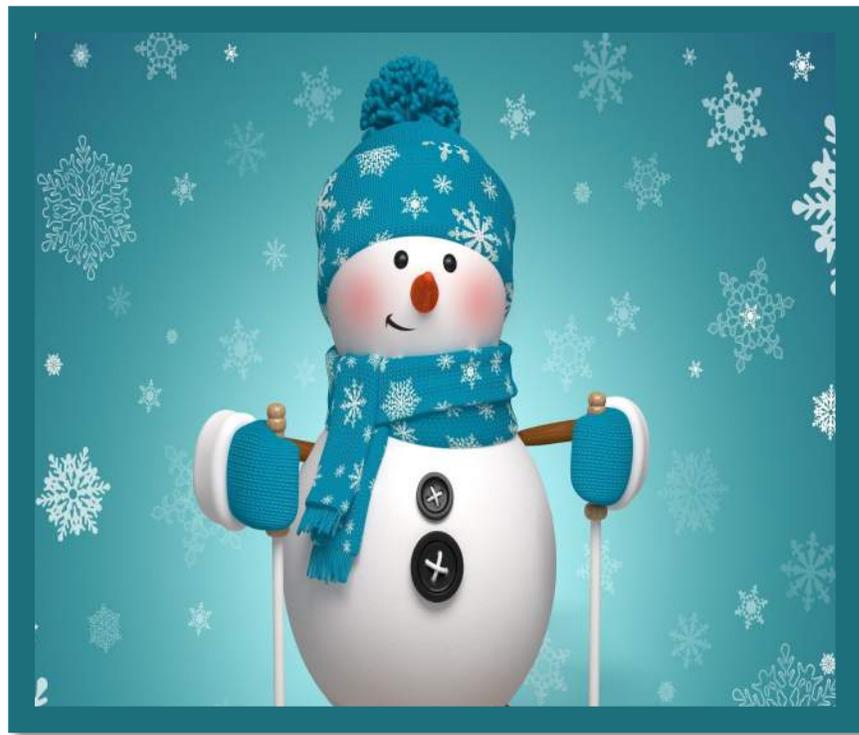
The EMS community is being asked to submit nominations of ALS or BLS practitioners as well as instructors whose service or actions have exemplified their spirit to serve, teach, improved patient care or promoted emergency medical services within the Seven Mountains EMS Council region.

Nominees should be those individuals who you believe have made a significant contribution to the provision of emergency care by using their skills and knowledge to help improve our emergency medical services system and who represent the qualities that Jack Williams demonstrated during his service to our region.

This year the Jack Williams Award recipient will be announced at The Seven Mountains EMS Council’s Spring Conference EMS Awards at the Pine Barn Inn on Saturday evening March 18, 2016.

Nominations are being accepted for any EMS Provider or Instructor within the Seven Mountains EMS Council Region whom you believe deserves this recognition. General criteria for consideration include:

- ❏ **Current Pennsylvania Department of Health Certification**
- ❏ **Possesses outstanding clinical and documentation skills.**
- ❏ **Continuing education and/or Medical Command is in good standing.**
- ❏ **Consistently performs care in an exemplary manner and exhibits compassion to their patients.**
- ❏ **Has contributed significantly to the development and growth of pre-hospital EMS in the region.**
- ❏ **Has the respect of the EMS Community.**



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**The Regional Staff would like to wish you and yours
a happy and healthy Holiday Season...**