

**MEMORANDUM OF UNDERSTANDING
BETWEEN
JEFFERSON COUNTY PUBLIC HEALTH CARE SERVICE DISTRICT NO. 2,
D/B/A JEFFERSON HEALTHCARE
AND
EAST JEFFERSON FIRE RESCUE**

This Memorandum of Understanding (the “MOU”) is made as of December 18, 2007, by and between Jefferson County Public Health Care Service District No. 2, d/b/a Jefferson Healthcare (“Jefferson Healthcare”), and East Jefferson Fire Rescue “ground transport provider.”

I. Authority. This Memorandum of Understanding is entered into by the Jefferson Healthcare under the authority of RCW 70.44.060 and the ground transport provider under the authority of RCW 52.12.031 and in conformity with chapter 39.34 RCW, the Interlocal Cooperation Act.

II. Purpose. The purpose of this MOU is to establish the terms under which the ground transport provider will transfer patients of Jefferson Healthcare by ambulance to other health care facilities.

III. Objective. The objective of this agreement is to enter into a memorandum of understanding between Jefferson Health Care provider and one local primary ground transport provider.

IV. Patient Transfers. Jefferson Healthcare will identify for transfer those patients who require services not offered by Jefferson Healthcare. Such patients will be transferred by ambulance to another acute care facility that provides the needed services.

V. Transfer Protocols. The decision to transfer a patient to another facility shall be made in compliance with the policies and procedures of Jefferson Healthcare. The transfer shall be at the discretion of and initiated by the patient’s attending physician or an emergency room physician, physician assistant or nurse practitioner. After consulting with the patient or a person authorized to act on behalf of the patient, the practitioner initiating the transfer shall have the discretion and authority to determine the health care facility to which the patient will be transferred, and the licensure level of the transporting staff.

VI. Referral Procedures. Referrals to the ground transport provider will be coordinated through one designated control point at Jefferson Healthcare. The control point shall coordinate all requests from all hospital departments.

VII. Payment for Services. The ground transport provider shall bill the patient receiving the services or any source available for payment of services provided to the patient unless Jefferson Healthcare expressly requests that Jefferson Healthcare be billed for the services.

VIII. Qualifications. To be eligible to provide transfers of patients of Jefferson Healthcare, the ground transport provider shall maintain compliance with the following qualifications:

- A. Maintain a valid license in compliance with state law and local ordinances;
- B. Comply with all federal, state and local municipal requirements involving patient transport, including WAC 246-976-890, which requires verified pre-hospital trauma services for interfacility transfer of trauma patients;
- C. Contract in compliance with State licensing requirements with a State approved physician to act as its Medical Program Director (“MPD”) who shall be responsible for providing medical oversight and monitoring narcotic inventory;
- D. Maintain verifiable malpractice insurance acceptable to Jefferson Healthcare;
- E. Submit all run reports to the MPD for review and quality assurance review and provide copies to Jefferson Healthcare upon request;
- F. Maintain continuing medical education as required by the MPD;
- G. Ensure that all policies and procedures are reviewed and approved by the MPD;
- H. Maintain transport vehicles in a proper operating and safe condition in accordance with State requirements and make available all vehicle maintenance records for review by Jefferson Healthcare upon request
- I. Provide necessary medications and medical equipment required for patient transport;
 - 1. Specialized equipment such as IV Pumps and Ventilators purchased by EJFR will be under the care and maintenance of Jefferson Healthcare certified personnel. Costs associated with maintenance of those items will be billed to EJFR on a quarterly basis.
- J. Maintain a minimum of one transport vehicle fully staffed and available to transport patients from Jefferson Healthcare 24-hours per day, seven days per week and maintain sufficient staff are available to ensure appropriate rest periods for the staff; and
 - 1. Ensure compliance at a minimum level of 90% with the following response times:
 - i. For critical patients, ground transport providers shall be available at Jefferson Healthcare within 20 minutes of the request for response; and
 - ii. For non – critical patients, ground transport providers shall be

available at Jefferson Healthcare within 30 minutes of request for response.

- K. In the event Jefferson Healthcare requires a transporter to provide a second transport team and vehicle while the transporter’s first team is assigned to a previous transport from Jefferson Healthcare, the provider shall respond to the second request within 40 minutes 90% of the time.

Jefferson Healthcare will make every effort to provide as much advance notice as possible prior to needed transport. If these times cannot be met, Jefferson Healthcare will determine alternate transport to provide for the best interests of the patient.

IX. Benefits. This agreement is entered into for the benefit of the parties to this agreement only and shall confer no benefits, direct or implied, on any third persons.

X. Non-Exclusive Agreement. The parties to this agreement shall not be precluded from entering into similar agreements with other municipal corporations or service providers.

XI. Renewal/Terminations.

A. The term of this agreement shall commence August 1, 2008, and shall continue through December 31, 2015

B. Either party may terminate this agreement at any time upon 60 prior written notice for cause and at any time without cause upon 120(Original signed agreement 120 changed to 360) days written notice.

We, the undersigned, agree to all the terms described herein.

JEFFERSON HEALTHCARE
By: _____

EAST JEFFERSON FIRE RESCUE
By: _____

Print Name

Print Name

Date signed _____

Date signed _____