

2018 Seattle City Council Green Sheet

Ready for Notebook

Tab	Action	Option	Version
196	1	B	1

**Budget Action Title:** Add \$200,000 GSF to SFD for triage nurse services pilot program in the Fire Alarm Center

Ongoing: No

Has CIP Amendment: No Has Budget Proviso: No

Primary Sponsor: Bagshaw, Sally

Councilmembers:

Staff Analyst: Amy Tsai

Council Bill or Resolution:

Date		Total	SB	KH	LG	BH	LH	RJ	DJ	MO	KS
	Yes										
	No										
	Abstain										
	Absent										

**Summary of Dollar Effect**

*See the following pages for detailed technical information*

	<b>2017 Increase (Decrease)</b>	<b>2018 Increase (Decrease)</b>
<b>General Subfund</b>		
<b>General Subfund Revenues</b>	\$0	\$0
<b>General Subfund Expenditures</b>	\$0	\$200,000
<b>Net Balance Effect</b>	\$0	(\$200,000)
<b>Total Budget Balance Effect</b>	\$0	(\$200,000)

**Budget Action description:**

This green sheet would add \$200,000 GSF to the Seattle Fire Department (SFD) to establish nurse triage capability in the Fire Alarm Center (FAC) as a one-year pilot program. It would be funded by revenues from an interfund loan secured by revenue from the future sale of the "Tear-Drop Site." The purpose of this additional capability would be to give the FAC additional resources to triage lower acuity calls and prevent the dispatch of front-line operations units by having a pool of peak-hour (approximately 7a.m.-7p.m.) nurses who could effectively divert stable, low acuity calls to alternate resources. Telephone triage nurses could provide home care instructions for minor complaints or schedule patients at urgent care centers, walk-in clinics, mental health providers, primary care, pharmacies, or other social services. The nurses could help arrange alternate transportation such as taxicabs, cabulances, the Emergency Service Patrol van, Mobile Crisis Team, or other units besides an SFD medic unit or AMR ambulance.

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The addition would support SFD's ongoing efforts to reduce low acuity alarms and provide better service to callers. Nurse triage capability at the FAC would directly reduce dispatches for complaints recognized by 911 dispatchers to be nonemergent in nature. It could help better match patients with appropriate levels of care for some 911 callers for whom transportation to a hospital emergency room would be a costly and unnecessary decision. It would be particularly useful to locations such as homeless shelters or senior living that have frequent 911 calls made for low acuity complaints.

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**Budget Action Transactions**

**Budget Action Title:** Add \$200,000 GSF to SFD for triage nurse services pilot program in the Fire Alarm Center

#	Transaction Description	Position Title	Number of Positions	FTE	Dept	BCL or Revenue Source	Summit Code	Fund	Year	Revenue Amount	Expenditure Amount
1	Add nurse services				SFD	Resource Management	F2000	00100	2018		\$200,000