



Legislation Details (With Text)

File #: CB 119509 **Version:** 2 **Name:** CB 119509
Type: Ordinance (Ord) **Status:** Passed
In control: City Clerk

On agenda: 5/13/2019

Final Action: 5/16/2019 **Ord. No.** Ord 125818

Title: AN ORDINANCE relating to a Mobile Integrated Health pilot; amending Ordinance 125724, which adopted the 2019 budget; changing appropriations to various departments and budget control levels; lifting a proviso; and ratifying and confirming certain prior acts.

Sponsors: M. Lorena González

Indexes:

Attachments: 1. Att 1 - Green Sheet 13-40-A-3-2019, 2. Att 2 - Response to City Council Regarding Green Sheet 13-40-A-3-2019, 3. Summary and Fiscal Note, 4. Central Staff Memo, 5. Presentation, 6. Proposed Amendment 1, 7. Signed Ordinance 125818, 8. Affidavit of Publication

Date	Ver.	Action By	Action	Result
5/16/2019	2	City Clerk	attested by City Clerk	
5/16/2019	2	Mayor	returned	
5/16/2019	2	Mayor	Signed	
5/15/2019	2	City Clerk	submitted for Mayor's signature	
5/13/2019	1	City Council	passed	Pass
5/8/2019	1	Gender Equity, Safe Communities, New Americans, and Education Committee	pass as amended	Pass
5/6/2019	1	City Council	referred	
5/2/2019	1	Council President's Office	sent for review	
4/30/2019	1	City Clerk	sent for review	

CITY OF SEATTLE

ORDINANCE _____

COUNCIL BILL _____

AN ORDINANCE relating to a Mobile Integrated Health pilot; amending Ordinance 125724, which adopted the 2019 budget; changing appropriations to various departments and budget control levels; lifting a proviso; and ratifying and confirming certain prior acts.

WHEREAS, The City of Seattle’s 2019 Adopted Budget included a proviso on funds in the Finance General Department concerning the implementation of a Mobile Integrated Health Response Team in the Seattle Fire Department (SFD); and

WHEREAS, the proviso in Green Sheet 13-40-A-3-2019 specifies that “The Finance General funding will not be released until the Executive provides a plan to scope the City’s emergency response system to better align with the needs demonstrated by its most frequent utilizers, including estimated staffing and resource needs to launch a Mobile Integrated Health Response Team pilot program”; and

WHEREAS, the Executive’s Emergency Response Inter-Departmental Team (IDT), a work group consisting of personnel from the Seattle Fire Department, Seattle Police Department, Seattle Human Services Department, Seattle-King County Public Health, and other internal and external stakeholders, submitted a Mobile Integrated Health response unit (MIH Team) pilot proposal to the Chair of the Gender Equity, Safe Communities, New Americans and Education Committee; and

WHEREAS, the Executive’s Emergency Response IDT recommends the design, implementation, and evaluation of a pilot MIH Team to work in partnership with other local resources to more effectively address non-emergent healthcare, behavioral, and social crises in the context of 911 responses; and

WHEREAS, a working group made up of SFD, International Association of Fire Fighters Local 27 and necessary city, county and private partner agencies has been assembled to bring the MIH Team pilot proposal from concept to fruition and the MIH Team is expected to be in operation in the third quarter of 2019; and

WHEREAS, the Chair of the Gender Equity, Safe Communities, New Americans and Education Committee has expressed an intent to review this legislation and the IDT’s response to Green Sheet 13-40-A-3-2019 in the Gender Equity, Safe Communities, New Americans and Education Committee on May 8, 2019;

NOW, THEREFORE,

BE IT ORDAINED BY THE CITY OF SEATTLE AS FOLLOWS:

Section 1. The appropriations for the following items in the 2019 Budget are modified, as follows:

Item	Department	Fund	Budget Summary Level/ BCL Code	Additional Budget Appropriation
1.1	Seattle Fire Department (SFD)	General Fund (00100)	Operations (00100-BO-FD-F3000)	\$475,000

Finance General (FG)	General Fund (00100)	Reserves (00100-BO-FG-2QD00)	(\$475,000)
Net Change			\$0

Section 2. The restriction imposed by the following budget proviso, which limited spending on the following item, is removed because the conditions set forth in the proviso have been satisfied and it is no longer a restriction for any purpose, including those set forth in Section 1(b) of Ordinance 125724.

Item	Department	Green Sheet	Proviso
1	Seattle Fire Department (SFD)	13-40-A-3-2019	The Finance General funding will not be released until the Executive provides a plan to scope the City’s emergency response system to better align with the needs demonstrated by its most frequent utilizers, including estimated staffing and resource needs to launch a Mobile Integrated Health Response Team pilot program by April 1, 2019. The Executive is requested to work with Departments including the Seattle Fire Department, the Seattle Police Department, the Human Services Department, and Public Health and other internal and external stakeholders, as necessary, to develop and provide this plan to the Council by March 1, 2019.

Section 3. As part of the mobile integrated health pilot project evaluation identified in the Executive’s response to Green Sheet 13-40-A-3-2019, Attachment 2 to this ordinance, the Seattle Fire Department shall develop measures that identify whether an advanced provider such as a Registered Nurse, a Nurse Practitioner, or a Physician’s Assistant could have administered in-field medical treatment to alleviate the complaints of a low-acuity patient. Such measures shall include, but not be limited to:

- A. Whether a low-acuity patient could have received or benefited from in-field urgent care treatment such as the suturing of a cut or lesion; or the administering of a pain-relieving medication or antibiotic;
- B. Whether a low-acuity patient could have received in-field medical clearance for an occurrence of: 1) an injury such as a minor joint sprain or non-life-threatening illness such as a minor cold or flu; or 2) a condition that might present as a potential life-threatening situation, but that can be medically cleared by an

advanced provider with more medical training than an emergency medical technician or paramedic.

C. Whether a low-acuity patient could have received or benefited from a comprehensive in-home medical and psychosocial assessment;

D. Whether a low-acuity patient refused to be transported to an urgent care or primary care facility that is partnering with the Mobile Integrated Health Team and the reasons that the caller refused to be transported; and whether the above facilities were refused or were otherwise unable to provide care to the patient; and

E. For the requirements of subsections 3.A-D of this ordinance, if a client would have benefited from in-field treatment, whether such treatment would be best provided by a Registered Nurse, Nurse Practitioner, or Physician’s Assistant

Section 4. Any act consistent with the authority of this ordinance taken after its passage and prior to its effective date is ratified and confirmed.

Section 5. This ordinance shall take effect and be in force 30 days after its approval by the Mayor, but if not approved and returned by the Mayor within ten days after presentation, it shall take effect as provided by Seattle Municipal Code Section 1.04.020.

Passed by the City Council the _____ day of _____, 2019, and signed by me in open session in authentication of its passage this _____ day of _____, 2019.

President _____ of the City Council

Approved by me this _____ day of _____, 2019.

Jenny A. Durkan, Mayor

Filed by me this _____ day of _____, 2019.

Monica Martinez Simmons, City Clerk

(Seal)

Attachments:

Attachment 1 - Green Sheet 13-40-A-3-2019

Attachment 2 - Response to City Council Regarding Green Sheet 13-40-A-3-2019