



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Long-Term Support Administration
PO Box 45600, Olympia, Washington 98504-5600

June 30, 2022

AL TSA: CCRSS #2022-015
USE OF EMERGENCY MEDICAL SERVICES BY CCRSS PROVIDERS

Dear Certified Community Residential Services and Supports Provider:

The purpose of this letter is to remind you of relevant state laws and rules pertaining to your responsibilities related to clients, their medical issues, and the use of the local fire departments, emergency medical services (EMS), or “9-1-1.” Please note, per [Chapter 388-101 WAC](#), you are required to always have sufficient and trained staff to respond to and support all client needs to maintain their health, welfare, and safety.

In a recent meeting with Lacey Fire Department, they reported getting 9-1-1 emergency calls from Supported Living providers asking for assistance with tasks which are the responsibility of the provider and their staff to complete. For example, a client fell and was uninjured, but the home did not have sufficient staff to help the client up off the floor.

Lacey Fire Department provided information on emergency and non-emergency calls which includes, but is not limited to the following:

Emergency: Dial 9-1-1

- Trouble breathing. Unable to speak in full sentences
- Person is unresponsive
- Skin or lips are blue, purple, or gray
- Large burn or cut that will not stop bleeding

Non-Emergency: Should be directed to personal care provider or a community urgent care.

- Medication refill
- Blood pressure check
- Headache
- Cold or flu symptoms (stuffy nose, fever, cough, etc.)

[Please see Lacey Fire Department Support Services pamphlet](#)

NOTE: This letter does not mean you should never call 9-1-1. When your evaluation and assessment (within your scope of practice and abilities) of the client shows the client may be experiencing a medical emergency and presenting with acute symptoms outside of their baseline presentation, you should immediately call 9-1-1. Please refer to the guidance on page 2 of this letter when calling 9-1-1.

**GUIDANCE FOR
 EMERGENCY MEDICAL RESPONSE AND TRANSPORT REQUESTS**

When Calling 9-1-1:	When EMS Arrives:
<p>Be ready to relay the following information:</p> <ul style="list-style-type: none"> • Your name and role • Address where help is needed • Call-back number • Client information: <ul style="list-style-type: none"> ✓ Age ✓ Gender ✓ Special medical complaint or problem: “Chest pain”, “Shortness of breath”, etc. ✓ Medical history relevant to or potentially impacted by the current medical event ✓ Any medical treatment provided and status change. <p>Remember to immediately call 9-1-1 again if conditions worsen.</p>	<p>Please be prepared to provide as much information as you can including:</p> <ul style="list-style-type: none"> • Client age and gender • Legal guardian name and contact info (if applicable) • Details of medical complaint/problem • Level of consciousness • Vital signs (if available) • Medical history • Medications/MAR • Care provided: oxygen, medications, etc. • Plan and transport destination • Medical orders/directives (i.e., POLST)

**This guidance also includes information from King County Emergency Medical Services.*

Thank you for your continued commitment to the clients’ health and safety. If you have any questions, please contact your CCRSS Field Manager. For additional guidance regarding medical emergency response within your agency, you may contact your local fire department or EMS provider.

Sincerely,



Mike Anbesse, Director
 Residential Care Services

DSHS: “Transforming Lives”