1					IV	leeting Minutes						
2		rd										
3	Bi-Monthly Meeting											
4	Navarralia v 0. 0000											
·												
5	I.	Op	enir	ng of	Meeting							
6		a) With confirmation of quorum, Richard Kirton called the meeting to order at 1:17pm.										
7	Ш	Δr	nro	val of	Minutes							
	•••	 Approval of Minutes a) Motion to accept the September 28th meeting minutes. 										
8		a)	IVI			•						
9 10					oned by: Karl Hatton ı Favor	Motioned & Secondo Motion Passo						
1 1		Da		otod I	Panarta ⁹ Pagamman	dations						
	ш.	Κŧ	•		Reports & Recommen							
12		a)	Th	ne Trai	ning Subcommittee Surve	ey Results:	[See Attachment A]					
13			i)	The	results were presented by	y Katy Gilbert, State Office.						
14 15			(,	Stay with 24 hours of requiours?	ired continuing education (CE)	or consider alternate number of					
16				(a)	80% for "Stay"							
17				(b)	20% for "consider alter	rnative" with no consensus on a	alternate number.					
18		Motion to accept the recommendation to require 24 hours of CE annually.										
19 20					oned by: Erin Gauthier Favor	Motioned & Second Motion Pass	tioned & Seconded Motion Passed					
21 22 23			(Ć		cation related to required CE to ?" actual question was "should t	pics; survey asked "who should here be required topics for					
24 25 26				(a)	,	the correct question (Should spours? If so, what topics should l	•					

27 28			(3)		aining Topics recommendations and comments, from surve sponses, were shared with and discussed by the Board.	y results and email [See Attachments A & B]		
29 30			((a)	Discussions were tabled until the next meeting; allowing B process survey results and all comments/questions preser			
31	b)		WAC	Dev	elopment:			
32		i)	Re	epor	t in progress, nothing to present.			
33	c)		State	Equ	ivalency Report:			
34		i)	Up	pdat	e was provided by Aimee Fournier-Plante.			
35 36			(1)		I gathering data from other states; essentially looking at exc ates with similar requirements to Washington's. More to com			
37	d)		Comm	nuni	ty College Report:			
38		i)	Re	epor	t was presented by Karl Hatton.	[See Attachment C]		
39 IV.	Ne	w	Busii	nes	s			
40 41	a)	Board discussed upcoming scheduled meetings; acknowledged no meetings will be held November 23 rd or December 28 th due to holidays.						

44 VI. Adjournment

a)

43

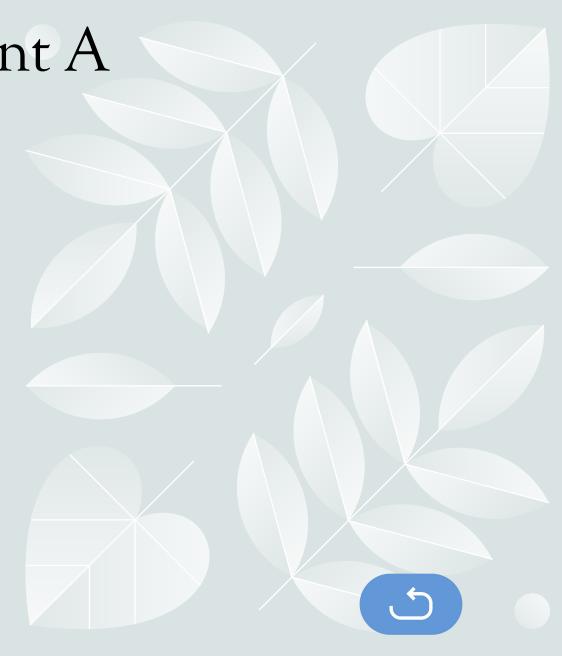
42 V. Public Comment

No comments.

45 a) With no further business to discuss, Richard Kirton adjourned the meeting at 2:55pm.

Attachment A

Certification Survey Results

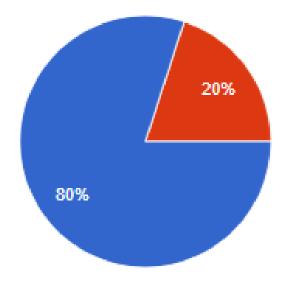


Recommended CE Hours for Recertification

The certification board received the Training Subcommittee recommendation for 24 hours for continuing education. Since this recommendation, the board received additional information regarding other states CE hour requirements and has asked for another review. Please see spreadsheet attached to your email. Based on the new information, do you vote to:



15 responses



- A. Stick with the original recommendation of 24 hour annual
- B. Recommend a different requirement which best meets the needs of our telecommunicators for continuing education for recertification

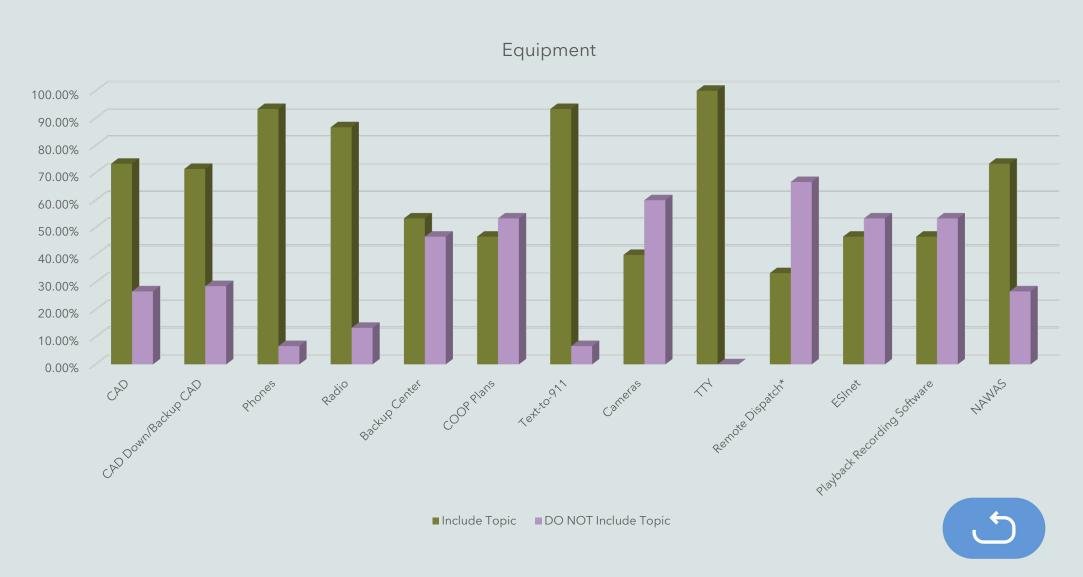


Alternate CE Hours Recommendation



(C)

Training Section 1: Equipment



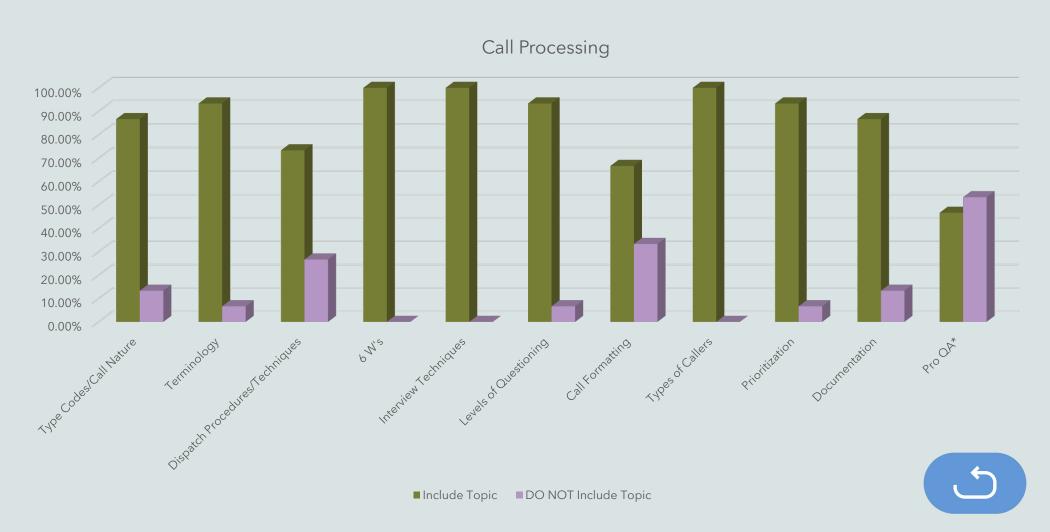
Training Section 1: Equipment (Cont.)

- · Recommended to **Include:**
 - · CAD
 - · CAD Down/Backup CAD
 - Phones
 - Radio
 - Backup Center
 - Text-to-911
 - TTY
 - NAWAS

- · Recommended to **Remove:**
 - · COOP
 - Cameras
 - Remote Dispatch
 - ESInet
 - Playback Recording Software



Training Section 2: Call Processing (Section A, General & Section B, Call Taking)



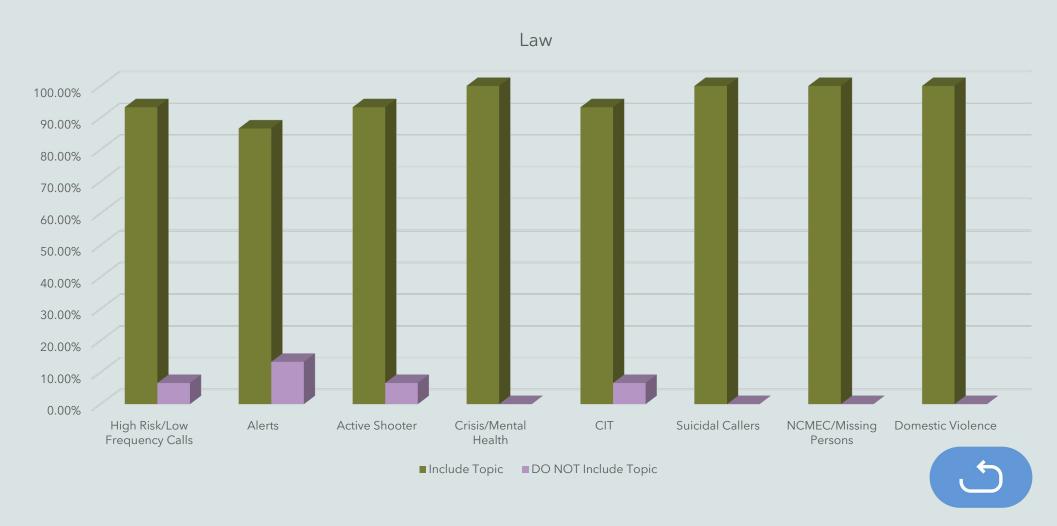
Training Section 2: Call Processing (Section A, General & Section B, Call Taking) (Cont.)

- Recommended to **Include:**
 - Type Codes/Call Nature
 - Terminology
 - Dispatch Procedures/Techniques
 - 6 W's
 - · Interview Techniques
 - Levels of Questioning
 - · Call Formatting
 - Types of Callers
 - Prioritization
 - Documentation

- Recommended to **Remove:**
 - ProQA



Training Section 2: Call Processing (Section C, Law)



Training Section 2: Call Processing (Section C, Law) (Cont.)

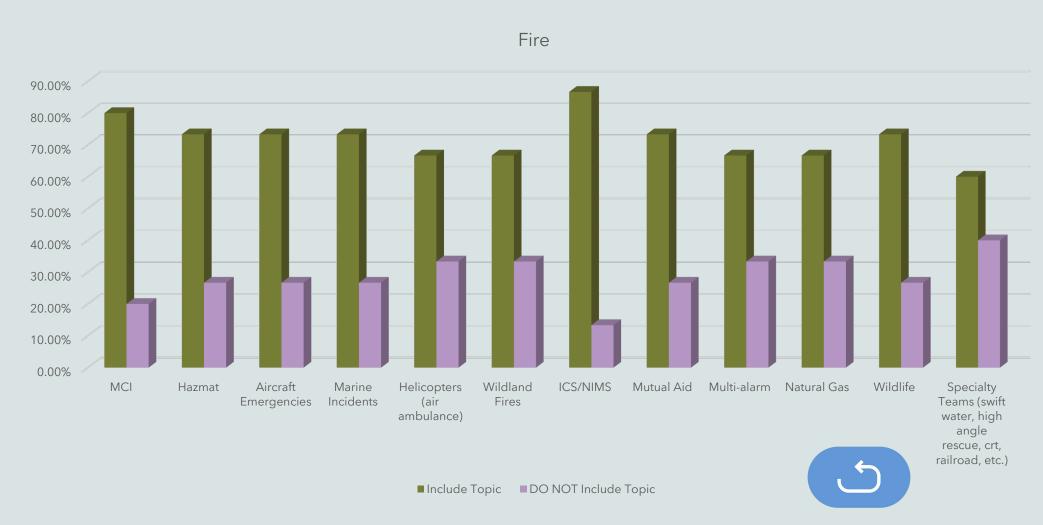
- · Recommended to Include:
 - High Risk/Low Frequency Calls
 - Alerts
 - Active Shooter
 - Crisis/Mental Health
 - · CIT
 - Suicidal Callers
 - NCMEC/Missing Persons
 - Domestic Violence

· Recommended to **Remove:**

· None



Training Section 2: Call Processing (Section D, Fire)



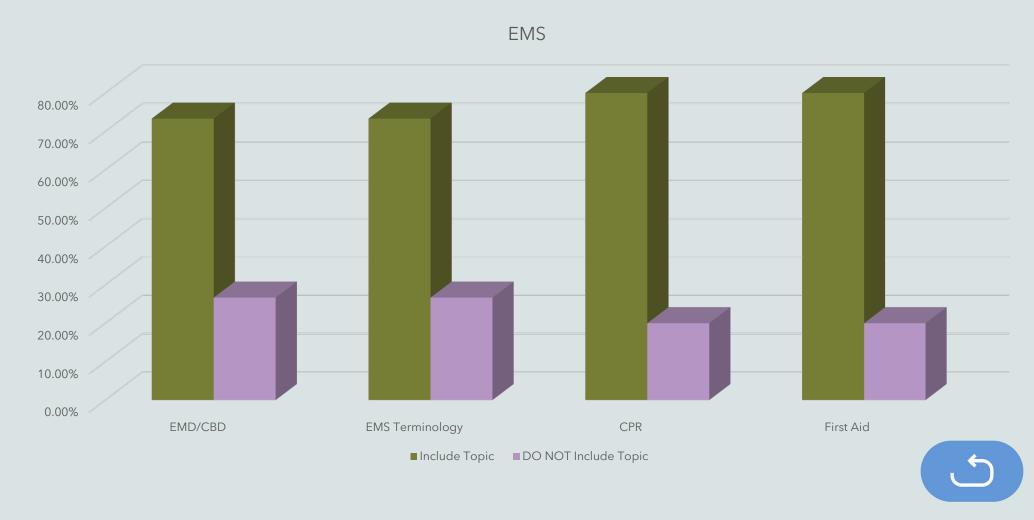
Training Section 2: Call Processing (Section D, Fire) (Cont.)

- Recommended to **Include:**
 - · MCI
 - Hazmat
 - Aircraft Emergencies
 - Marine Incidents
 - Helicopters (air ambulance)
 - Wildland Fires
 - ICS/NIMS
 - Mutual Aid
 - Multi-Alarm
 - Natural Gas
 - Wildlife
 - Specialty Teams

- Recommended to **Remove:**
 - None



Training Section 2: Call Processing (Section E, EMS)



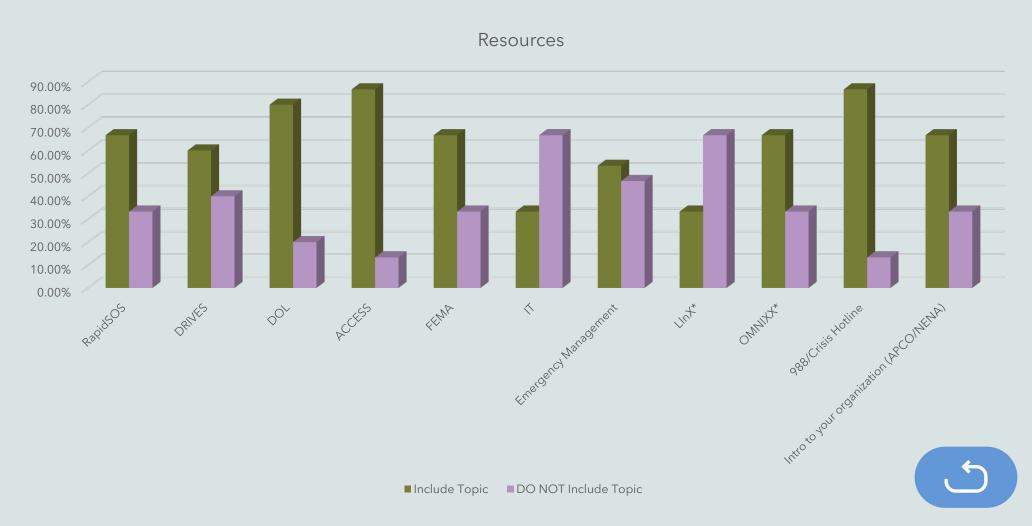
Training Section 2: Call Processing (Section E, EMS) (Cont.)

- Recommended to Include:
 - · EMD/CBD
 - EMS Terminology
 - · CPR
 - First Aid

- Recommended to **Remove:**
 - · None



Training Section 3: Resources



Training Section 3: Resources

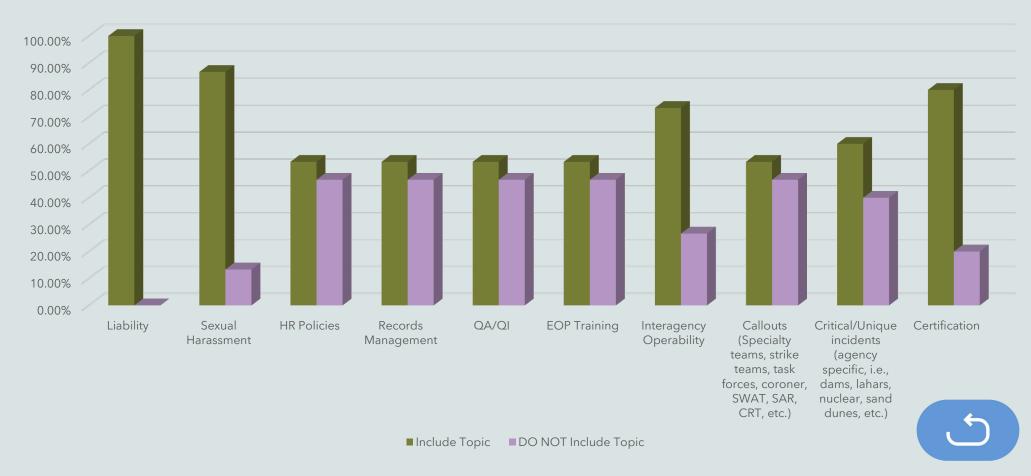
- Recommended to **Include:**
 - RapidSOS
 - DRIVES
 - · DOL
 - ACCESS
 - FEMA
 - Emergency Management
 - · OMNIXX
 - 988/Crisis Hotline
 - · Intro to Your Organization

- Recommended to **Remove:**
 - · IT
 - · LInX



Training Section 4: Policies & Procedures





Training Section 4: Policies & Procedures

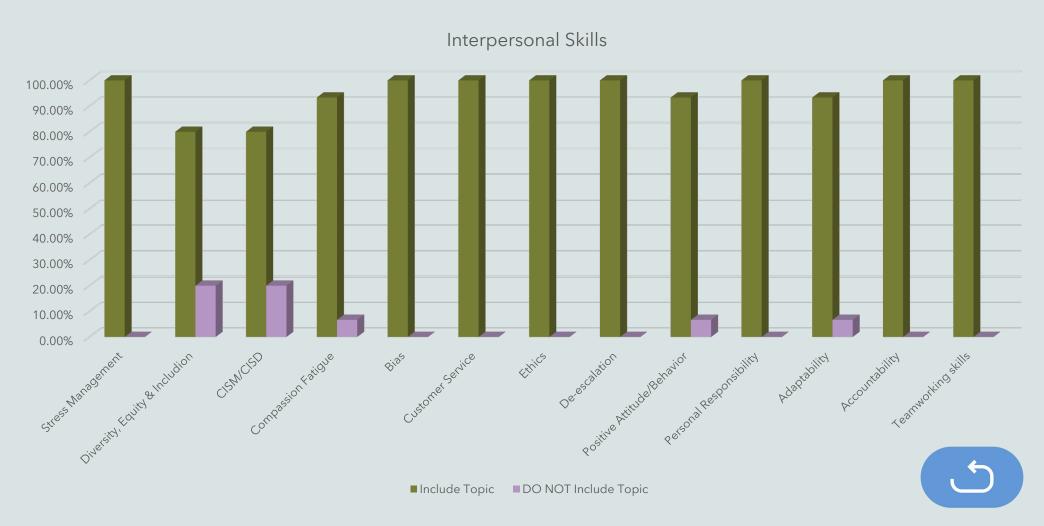
- Recommended to **Include:**
 - Liability
 - Sexual Harassment
 - HR Policies
 - · Records Management
 - · QA/QI
 - EOP Training
 - Interagency Operability
 - Callouts
 - · Critical/Unique Incidents
 - Certification

· Recommended to **Remove:**

None



Training Section 5: Interpersonal Skills



Training Section 5: Interpersonal Skills

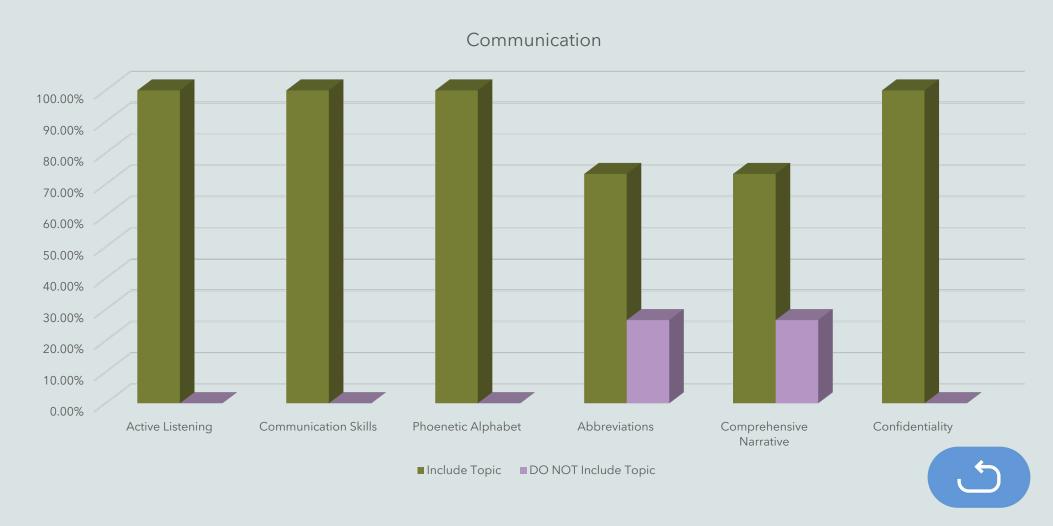
- Recommended to **Include:**
 - Stress Management
 - Diversity, Equity & Inclusion
 - · CISM/CSD
 - Compassion Fatigue
 - Bias
 - Customer Service
 - Ethics
 - De-escalation
 - Positive Attitude/Behavior
 - Personal Responsibility
 - Adaptability
 - Accountability
 - · Teamworking Skills

- Recommended to **Remove:**
 - · None

*Please note that CIT and Liability were not surveyed in this section as they are already listed under other sections.



Training Section 6: Communication



Training Section 6: Communication

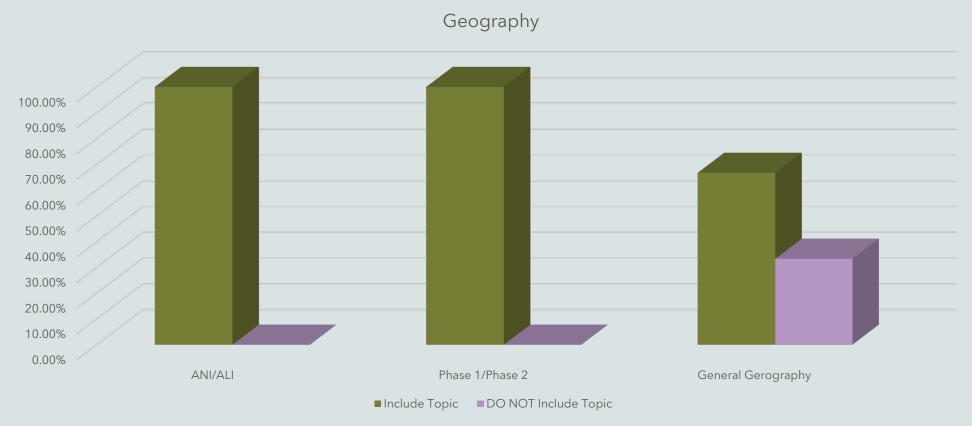
- Recommended to **Include:**
 - Active Listening
 - Communication Skills
 - Phonetic Alphabet
 - Abbreviations
 - Comprehensive Narrative
 - Confidentiality

- · Recommended to **Remove:**
 - · None

*Please note that QA/QI were not surveyed in this section as it is already listed under other sections.



Training Section 7: Geography





Training Section 7: Geography

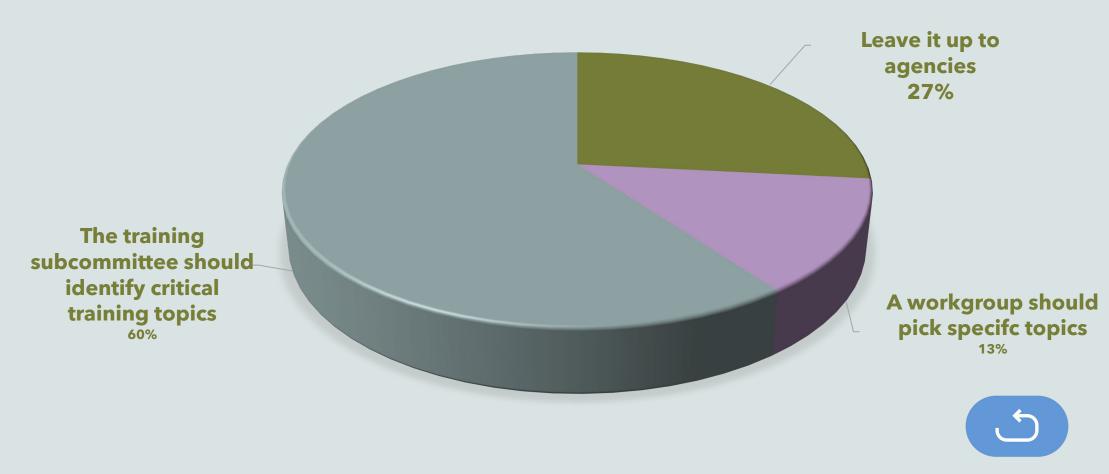
- · Recommended to Include:
 - ANI/ALI
 - Phase 1/Phase 2
 - · General Geography

- Recommended to Remove:
 - · None



What method should be used to determine what training topics should be considered for the required continuing education hours?

HOW TO DETERMINE REQUIREMENTS



Other Comments

"Even though the question about training topics said for all telecommunicators, I assumed that the fire/EMS topics would not be required for police-only agencies. In general I think the list of topics is too specific and there are too many agency-specific items that aren't appropriate to require for everyone in the state. I would ask the certification board to adopt only general, high-level topics as mandatory items and leave the specific topics up to each PSAP."



"Regarding initial certification, the majority of the topics I did not recommend are too agency-specific to be taught in an effective and relevant manner for a statewide course. Some of them may be appropriate to include if they are expected to be taught in PSAP rather than in an inter-agency setting. Also, many of these topics are only relevant to specific PSAPs, i.e. law only PSAPs do not need to certify on fire, medical skills are only needed at PSAPs that process medical, etc. All of the presented topics do appear to be relevant for continuing education, as I imagine that step to be more closely guided by individual agency training. I marked an option for the amount of hours since I am required to, but I don't have an inclination towards any particular number of hours per year."

"I think there is a need to consider size of agency when implementing these standards and possibly have a level for small, medium and large agency as well as division of duties if centers have employees who do it all or who learn to call take and then dispatch is a different training/classification."



I think under the Resources section that 211 should be mentioned.



Regarding the question on the 24 hour CE minimum, I think we should keep it at that number. This is in line with the RCW for LE training hours. I could see adjusting if law enforcement adjusted theirs as well to match, but this seems like it would be reasonable as we are wanting to be recognized as first responders. Here is the verbiage under a quick google search:



(5)

Other Comments (Cont.)

- So I am reviewing the list and here is what I came up with for feedback. I agree with the 7 core competencies but many of the topics under the 7 competencies are either getting wrapped up in the minutia or getting diluted for an actual certification process. I guess in short what do our trainees really need to know about ACCESS other than you will receive a certification from the state renewable every year? Or for that matter for a lot of agencies, all they need to know about air ambulances is here is the number to call to dispatch an ambulance. To me not a lot of sustenance for a state level certification.
- APCO/ANSI occupational analysis and model policies for training standards? I believe these would really make it easy to really pull out what is needed to be trained in a state level class, and what is needed to be trained at an agency level, as well as what is needed for continuing education topics. As I see the list now, there are a lot of certifications hidden within the list for state certification. Also, I think looking at something as objective as the APCO/ANSI models gives smaller agencies an even playing field with the larger agencies as their training programs can be tailored to their needs while still meeting the standard.

• I had a suggestion under the EMS section - It had EMD/CBD currently - I would also add APCO. I know KITTCOM moved over to APCO from EMD/Priority Dispatch a year ago.



- In the document, there is a reference that lists ProQA in section 2b under Call Taking with an asterisk indicating that it may be agency specific. But then under 2e under EMS it lists EMD/CBD. Why wouldn't EMD/CBD be also listed in 2b instead of specifically mentioning ProQA? National standards like NFPA 1225 (ref. Chapter 15, section 15.4.6, says that "any communication center that processes a medical event shall provide emergency medical dispatch." It doesn't specify a particular company or software).
- As with the above, 3i. references a specific mapping system product (e.g. RAPIDSOS) but should probably just say something more generic like 'mapping software'.
- Then, for the secondary PSAPs in the state (Spokane, Tacoma, Seattle, etc.), question was about the law enforcement requirements...
 - 2C several of these have fire/EMS cross-over components (e.g. iii., iv., v., viii.) and the hope is that
 training/issues could be tailored to the fire/EMS component
 - 3 as with above, some sub items (e.g. iii., iv., etc.) wouldn't apply to fire/EMS, but other non-law items might.

- When I attended training at Portland Community College, way back in the late 80's, we had training from the prosecutor's office on report writing, it was helpful to understand what key elements were important to document and how to be very concise in your documentation.
- We also had training related to medical issues, things that seemed benign like a child falling off a dresser or a person falling out of a tree, but understanding if the fall was twice their height it became a trauma patient due to the internal type injuries, they could sustain due to the distance of the fall. A vehicle accident where the vehicle is hit broadside with little impact and a patient may seem uninjured but due the side impact this can easily result in a ripped aorta and cause sudden death, the patient may only complain of back pain. A fracture to the femur could cause massive internal bleeding and be life threatening, a laceration to the arm pit, again imminent potential death. Just providing examples or scenarios of what sounds minor could be life threatening and its important to think outside the box, listen for clues, ask more questions.

11/09/2023

5

Other Comments (Cont.)

- With all the new mental health legislation it wouldn't hurt to work with behavioral health, possibly invite in volunteer patients to talk about their illness, their struggles. I volunteered for Catholic Community Services on a crisis line for two years before becoming a dispatcher and we had several panels of volunteer patients that came in to talk to us to help us understand their illness and how we could assist during a manic episode they were experiencing. We also had several day long classes from professionals in the field talking about different types of mental illness and what we should expect, in addition to suicidal triaging so we could determine the potential threat level of a suicidal caller, how to talk to them, how to talk to them, what to ask, what not to ask, understanding time is our friend, and how to keep the caller on the line, make a contract with the suicidal caller, etc.
- A class explaining the difference between civil and criminal law, explain the difference between a burglary vs a trespass, a robbery vs a theft, and liability issues/scenarios a dispatcher needs to avoid. Don't give legal advice, malicious act vs a mistake, negligence vs human error, ethics, leading their peers by example, importance of following policies even if you disagree with the policy, policies take the liability off the employee and are there to protect them and others.

11/09/2023



Other Comments (Cont.)

Cybersecurity, why we are required to change our password, why we don't share passwords, why we don't put our personal a thumb drive into a workstation, why we don't use our work PC to log into our personal email accounts, why everything has separate complicated passwords, why we use 2FA, and multifactor authentication. Examples of cities and states that have been hacked with ransomware. Potential cyber threats to our phone system, how it may be tied to the PSN. When we must shut all our technology down due to an attack, how will we perform our work? It's something they need to think about, and go back and ask their center, how do we work without CAD? Can we manually tone out fire stations, what if our phone lines go down, how do we take 911 calls, business calls, what do we do if we start receiving calls from another County, what does that mean. Can we manually review run cards, what is the most basic way to continue sending help when we don't have all the technology assigning units, beats, etc? How do we communicate with responders if our radio system fails, can we communicate via CAD, IM, portable radios? Teach them to think outside the box, everything they need to know isn't going to be in a manual, teach some critical thinking.

11/09/2023

Other Comments (Cont.)

- What is emergency management, what do they do, how do we work with them, how can they help support us. Bring in staff from emergency management departments to talk about what their regulated duties are, and other services they provide, the same with the health department, public works, public transportation, how can these other entities compliment dispatch when \$%&^ hits the fan.
- A class on reading and understanding WACIS/WACIC/NCIC, ACCESS returns. This would be very helpful



11/09/2023

Washington State Telecommunicator Certification Training Topics:

(Includes all recommended changes/additions)

1. Equipment

- a. CAD
- b. Record Management Systems
- c. Alerting systems
- d. CAD Down/Backup CAD
- e. Phones
- f. Radio
- g. Backup Center
- h. COOP Plans
- i. Cameras
- j. TTY
- k. ESInet
- I. Playback Recording Software
- m. NAWAS

2. Call Processing

- a. General Call Taking
 - i. Type Codes/Call Nature
 - ii. Terminology
 - iii. Time Delays
 - iv. Call Priorities
- b. Communication
 - i.. Active Listening
 - ii. Communication Skills
 - iii. Phonetic Alphabet
 - iv. Abbreviations
 - v. Comprehensive Narrative
 - vi. QA/QI
 - vii. Confidentiality
 - viii. 6 W's
 - ix. Interview Techniques
 - x. Levels of Questioning
 - xi. Call Formatting
 - xii. Types of Callers
 - xiii. Answer Priority
 - xiv. Documentation
 - xv. Minimum Information Gathering
 - xvi. EMD/CBD
 - xvii. 1st, 2nd, 3rd Party Callers
 - xviii. Public and Responder Safety
 - xix. Initial Dispatch Information
 - xx. Duplicate incident identification and information gathering
 - xxi. Incident Updates
 - xxii. Pre-arrival Instructions
 - xxiii. Referrals and Transfers

Attachment B

**This is a cleaned-up list of the suggested additions/ changes/removals that were delivered to the Board.



- xxiv. TTY/TTD
- xxv. Digital Media in 911
 - 1. Text from 911
 - 2. Text to 911
 - 3. Video
- xxii. Silent and Hang-up Calls
- b. Law Call Taking
 - i. High Risk/Low Frequency (?? How is this defined??)
 - ii. Alerts (Amber, Blue, Silver, etc.)
 - iii. Active Shooter (including school shootings)
 - iv. Crisis/Mental Health
 - v. CIT
 - vi. Suicidal Callers
 - vii. NCMEC/Missing Persons
 - viii. Domestic Violence
- c. Fire Call Taking
 - i. MCI
 - ii. Hazmat
 - iii. Aircraft Emergencies
 - iv. Marine Incidents
 - v. Helicopters (Air Ambulance)
 - vi. Wildland Fires
 - vii. ICS/NIMS
 - viii. Mutual Aid
 - ix. Multi-alarm
 - x. Natural Gas
 - xi. Wildlife
 - xii. Specialty Teams (swift water, high angle rescue, CRT, railroad, etc.) State Mobilization and DMCC (Disaster Medical Coordination Center)
- d. EMS Call Taking
 - i. EMD/CBD
 - ii. Terminology
 - iii. CPR
 - iv. First-Aid
 - v. Portable Orders for Life-Sustaining Treatment (POLST)
- 3. Dispatch Procedures/Techniques
 - a. General Dispatch Procedures
 - i. Type Codes/Call Nature
 - ii. Terminology
 - iii. Time Delays
 - iv. Call Priorities
 - v. 6 W's
 - vi. Prioritization
 - vii. Documentation
 - viii. Interagency Operability
 - ix. Inter-discipline Operability
 - x. Callouts
 - (specialty teams, strike teams, task forces, coroner, SWAT, SAR, CRT)



- xi. Critical/Unique Incidents (agency specific i.e.: dams, lahar, nuclear, sand dunes, etc.)
- xii. Initial incident dispatch
- xiii. Responder safety and status checking
- xiv. Relaying Updates
- xv. Resource Assignments
- xvi. Unit and Activity Tracking
- b. Law Dispatching
 - i. High Risk/Low Frequency
 - ii. Alerts (Amber/Blue/Silver, etc.) + hit and run now
 - iii. Active Shooter (including school shootings)
 - iv. Crisis/Mental Health
 - v. CIT
 - vi. Suicidal Callers
 - vii. NCMEC/Missing Persons
 - viii. Domestic Violence
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 - ix. Multi-alarm
 - x. Natural Gas
 - xi. Wildlife
 - xii. Specialty Teams (swift water, high angle rescue, CRT, railroad, etc.)
- d. EMS Dispatching
 - i. EMD/CBD/APCO
 - ii. Terminology
 - iii. CPR
 - iv. First-Aid

4. Resources

- a. Mapping Software (Rapid SOS, etc.)
- g. Emergency Management
- h. LINX
- j. 988/crisis hotline
- l. 211
- m. State 911 Office

Fusion Center

State/Local Behavioral Health



5. Professional Standards

- a. Authority, Confidentiality, and Liability
- b. Harassment
- c. Code of Conduct
- d. HR Policies
- e. Public Records Management & Role played in investigations
- f. QA/QI
- g. EOP Training (??)
- h. Certification & Recertification
- i. Professional Development Diversity, Equity, & Inclusion

6. Interpersonal Skills

- a. Stress Management
- c. CISM/CISD
- d. CIT
- e. Compassion Fatigue
- f. Bias
- g. Customer Service
- h. Ethics
- i. Liability
- j. De-escalation
- k. Positive attitude & behavior
- I. Personal responsibility
- m. Adaptability
- n. Accountability
- o. Teamworking Skills Statewide CORDICO system

8. Geography

- a. ANI/ALI
- b. Phase 1/Phase 2
- c. General Geography

5

^{*}See Additional Comments on following pages:

Seattle Fire's thoughts:

- In the document, there is a reference that lists ProQA in section 2b under Call Taking with an asterisk indicating that it may be agency specific. But then under 2e under EMS it lists EMD/CBD. Why wouldn't EMD/CBD be also listed in 2b instead of specifically mentioning ProQA? National standards like NFPA 1225 (ref. Chapter 15, section 15.4.6, says that "any communication center that processes a medical event shall provide emergency medical dispatch." It doesn't specify a particular company or software).
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Thanks for the opportunity to provide some input!

Chris Lombard - Assistant Chief

Seattle Fire Department

Hi there,

Regarding the question on the 24 hour CE minimum, I think we should keep it at that number. This is in line with the RCW for LE training hours. I could see adjusting if law enforcement adjusted theirs as well to match, but this seems like it would be reasonable as we are wanting to be recognized as first responders. Here is the verbiage under a quick google search:

24 hours

According to Washington state law, every peace or tribal officer certified under RCW 43.101.095 or 43.101.157 must complete a minimum of 24 hours of inservice training annually ¹. Additionally, all general authority Washington peace officers must complete the commission's two-hour online crisis intervention course as part of their annual twenty-four-hour in-service training requirement ². Law enforcement personnel initially employed on or after January 1, 1978, must engage in basic law enforcement training which complies with standards adopted by the commission ³.



Thank you for continuing to work on this for all of us!

Tiffany

Tiffany Beisler

Deputy Operations Manager

Skagit 911

I had a suggestion under the EMS section - It had EMD/CBD currently - I would also add APCO. I know KITTCOM moved over to APCO from EMD/Priority Dispatch a year ago.

Grace Meyers, RPL Police Support Services Manager

So I am reviewing the list and here is what I came up with for feedback. I agree with the 7 core competencies but many of the topics under the 7 competencies are either getting wrapped up in the minutia or getting diluted for an actual certification process. I guess in short what do our trainees really need to know about ACCESS other than you will receive a certification from the state renewable every year? Or for that matter for a lot of agencies, all they need to know about air ambulances is here is the number to call to dispatch an ambulance. To me not a lot of sustenance for a state level certification.

If we were going to really take an objective look at the certification process, may I suggest the APCO/ANSI occupational analysis and model policies for training standards? I believe these would really make it easy to really pull out what is needed to be trained in a state level class, and what is needed to be trained at an agency level, as well as what is needed for continuing education topics. As I see the list now, there are a lot of certifications hidden within the list for state certification.

Also, I think looking at something as objective as the APCO/ANSI models gives smaller agencies an even playing field with the larger agencies as their training programs can be tailored to their needs while still meeting the standard.

Thanks--Lh

[Lyle Hendrickson – Lincoln County]



When I attended training at Portland Community College, way back in the late 80's, we had training from the prosecutor's office on report writing, it was helpful to understand what key elements were important to document and how to be very concise in your documentation.

We also had training related to medical issues, things that seemed benign like a child falling off a dresser or a person falling out of a tree, but understanding if the fall was twice their height it became a trauma patient due to the internal type injuries, they could sustain due to the distance of the fall. A vehicle accident where the vehicle is hit broadside with little impact and a patient may seem uninjured but due

the side impact this can easily result in a ripped aorta and cause sudden death, the patient may only complain of back pain. A fracture to the femur could cause massive internal bleeding and be life threatening, a laceration to the arm pit, again imminent potential death. Just providing examples or scenarios of what sounds minor could be life threatening and its important to think outside the box, listen for clues, ask more questions.

With all the new mental health legislation it wouldn't hurt to work with behavioral health, possibly invite in volunteer patients to talk about their illness, their struggles. I volunteered for Catholic Community Services on a crisis line for two years before becoming a dispatcher and we had several panels of volunteer patients that came in to talk to us to help us understand their illness and how we could assist during a manic episode they were experiencing. We also had several day long classes from professionals in the field talking about different types of mental illness and what we should expect, in addition to suicidal triaging so we could determine the potential threat level of a suicidal caller, how to talk to them, how to talk to them, what to ask, what not to ask, understanding time is our friend, and how to keep the caller on the line, make a contract with the suicidal caller, etc.

A class explaining the difference between civil and criminal law, explain the difference between a burglary vs a trespass, a robbery vs a theft, and liability issues/scenarios a dispatcher needs to avoid. Don't give legal advice, malicious act vs a mistake, negligence vs human error, ethics, leading their peers by example, importance of following policies even if you disagree with the policy, policies take the liability off the employee and are there to protect them and others.

Cybersecurity, why we are required to change our password, why we don't share passwords, why we don't put our personal a thumb drive into a workstation, why we don't use our work PC to log into our personal email accounts, why everything has separate complicated passwords, why we use 2FA, and multifactor authentication. Examples of cities and states that have been hacked with ransomware. Potential cyber threats to our phone system, how it may be tied to the PSN. When we must shut all our technology down due to an attack, how will we perform our work? It's something they need to think about, and go back and ask their center, how do we work without CAD? Can we manually tone out fire stations, what if our phone lines go down, how do we take 911 calls, business calls, what do we do if we start receiving calls from another County, what does that mean. Can we manually review run cards, what is the most basic way to continue sending help when we don't have all the technology assigning units, beats, etc? How do we communicate with responders if our radio system fails, can we communicate via CAD, IM, portable radios? Teach them to think outside the box, everything they need to know isn't going to be in a manual, teach some critical thinking.

What is emergency management, what do they do, how do we work with them, how can they help support us. Bring in staff from emergency management departments to talk about what their regulated duties are, and other services they provide, the same with the health department, public works, put transportation, how can these other entities compliment dispatch when \$%&^ hits the fan.

A class on reading and understanding WACIS/WACIC/NCIC, ACCESS returns. This would be very helpful

Deanna Wells

Cowlitz 9-1-1 Public Authority

I may be looking completely wrong at the project. What I remember was they were looking to build a program that established minimum training standards to be state certified or something similar to that. If that is correct, then this would be my advice.

If I were kind of the world and had full control over a project like this my advice would be to look to others (other states) who have completed such a task if any exist. See what things we can copy, what things went right and what things went wrong. Second, I would say start small. Look for commonality in your training and core competencies that you want to include and ensure they work for all agencies.

Once you have a working adopted plan ensure you have a good feedback path for agencies to share their successes and stumbles as well as ask questions and submit topics for inclusion.

I think this is a wonderful project, yet I have to believe it will be daunting as well.

Jerry Jensen

Operations Manager, CMCP
2790 Ocean Beach Hwy Longview, WA 98632
jensenj@cowlitz911.org

Cell (360) 431-4789

Office (360) 762-6803



Attachment C

Recommendations in reference to College programs and Telecommunicator Certification

- 1. How is curriculum established, vetted, reviewed?
 - a. The State can supply an outline of required elements that meet our standards and even included likely number of hours of instruction associated with the outline. Not necessarily have the State supply the T1 curriculum, but rather an outline of expectations. Preference to have a local SME provide the actual curriculum (perhaps then T1/APCO/Project 33) and provide instruction.
 - b. Vetting would be the same as is required of PSAPS with in-house programs.
 - c. Review would be on the same schedule as with in-house programs.
- 2. Should there be a fee?
 - a. There should be a nominal fee to sit for the test to become certified. Between \$50-\$100.
 - b. GA charges \$600 for the certification course. FL \$75 for test, PSAP fee of \$50 and recert fee of \$50.
 - c. Could this fee be reimbursed to the local PSAP? Is it needed to cover State costs of testing and tracking?
 - d. Fee could cover costs of sending a proctor to administer and grade the test. State covering documentation of certification and actual certification letter or document.
- 3. Does completing a program at a college or university result in certification?
 - a. Completing an appropriate and approved course would allow an individual to sit for the exam. Passing the exam would provide for a certification that would require that individual to get hired by a PSAP prior to the expiration of the certification in order to remain certified. They would have to meet hiring requirements and recert requirements within the mandated time-frame or lose certification.
- 4. Background, fingerprints prior to acceptance into class, or testing?
 - a. Recommend that anyone can enter their local college class. However, in order to meet requirements of that particular course (i.e. internship, sit-alongs, etc.) would require an agency fingerprinting and agency background for participation. Some kind of background and fingerprinting would be required to sit for the exam.



BOARD MEETING ATTENDANCE

911 Safety Telecommunicators' Certification Board **BOARD**:

November 9, 2023 **MEETING DATE:**

SECO Microsoft TEAMS [Virtual] **FACILITATOR:** LOCATION:

NAME	CONSTITUENCY	EMAIL	
BOARD MEMBERS IN ATTENDANCE			
Fournier-Plante, Aimee	PST-East	a.fournier-plante@bces.wa.gov	
Gauthier, Erin	Labor #2	egauthier@redmond.gov	
Gaylord, Jodi	PST-West	jodi.gaylord@clark.wa.gov	
Handy, Tom	WSAC	tomhandy@whitmancounty.net	
Hatton, Karl	PSAP Dir. – West	khatton@cityofpa.us	
Kirton, Richard	AC Chair	rkirton@kitsap911.org	
McKern, Tim	WFC	chief@qfr2.org	
McNamara, Erica	PSAP Dir. – East	erica.mcnamara@yakimawa.gov	
Myers, Katy	AC Vice-Chair	kmyers@norcom.org	
Worden, Mike	WASPC	mworden@co.okanogan.wa.us	

STATE OFFICE IN ATTENDANCE			
Gilbert, Katy	SECO	katy.gilbert@mil.wa.gov	
Kowalski, Nicci	SECO	Nicci.kowalski@mil.wa.gov	

PUBLIC IN ATTENDANCE			
Adams, Jacob	City of Seattle	Jacob.Adams@seattle.gov	
Law, Chris	Kitsap 911	claw@kitsap911.org	
Lovell, Kevin	University of Washington	klovell@uw.edu	
Nelson, Evan	Valley Communications	EvanN@Valleycom.org	
Rasmussen, Justin	City of Bellingham	jjrasmussen@cob.org	
VanBuskirk, Renee	RiverCom 911	renee.vanbuskirk@rivercom911.org	