

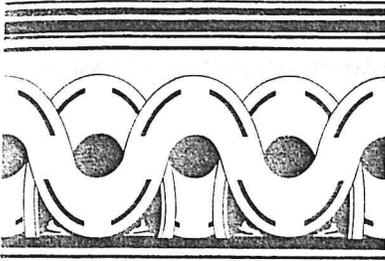
BAKER COUNTY AMBULANCE SERVICE AREA PLAN

Submitted to:

State of Oregon Department of Human Resources
Emergency Services Division

Prepared by:

James S. Brown



The Clearwater Group

*Government-Business and
Community Affairs Consultants*

P.O. Box 300

La Grande, Oregon 97850

January 14, 1991

Judge Steve Bogart
Baker County Court
1995 Third Street
Baker City, Oregon 97819-3339

Dear Judge Bogart,

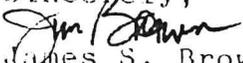
Enclosed you will find the information pertaining to the proposed Baker County Ambulance Service Area Plan as submitted to the State of Oregon, Department of Human Resources, Emergency Services Division.

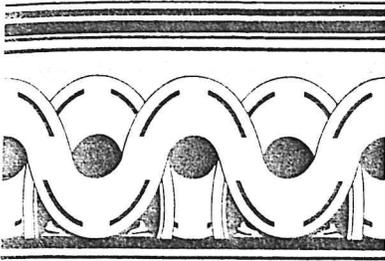
I have been attempting to develop a plan that not only meets the requirements mandated by the state to each county but provides effective and efficient emergency services in all parts of Baker County at an affordable cost to the taxpayers. Given the current impact of ballot measure five, efficient service is even more critical for the county to achieve while maintaining or improving levels of prehospital care to all citizens.

During the development of this plan I have explored the options available to you for managing the ASA in Baker County. The decision on structure is a local option. You have four options: To run the program through the county Health Department. Create an Ambulance Service Area Advisory Board staffed by volunteers, create an Ambulance Service Tax District (similar to Malheur County) or create a Health District for delivery of prehospital emergency services. I have developed this plan using the ASA Advisory Board concept assuming it is the most economical and efficient for the needs of Baker County. One other option discussed with Judge Ward at our meeting in December was the subscription based service used in Crook County and several western Oregon counties, however I have not researched this pending further guidance from the court.

I believe you will find most of the information self explanatory and meeting the needs of the county and the state. While some of the information is to be submitted as it is gathered by the current providers and passed along to me for inclusion in the plan, it is essentially an outline of the required information to date.

Please feel free to contact me if you have questions or need additional information. I will continue to assist Baker County during the review and acceptance phase by the state whenever my services are needed.

Sincerely,

James S. Brown



The Clearwater Group

*Government-Business and
Community Affairs Consultants*

P.O. Box 300

La Grande, Oregon 97850

December 31, 1990

Mr. Charles Kelly
ASA Program Coordinator
EMS/IP Section OHD
Department of Human Resources
Health Division
1400 SW. Fifth Avenue
Portland, Oregon 97201

Dear Charles,

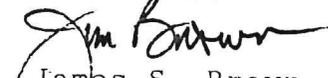
Pursuant to our telephone conversation yesterday I would like to submit the Baker County Ambulance Service Plan for adoption by the State of Oregon.

As we discussed over the telephone, most of the information is included in the plan with the exception of a few maps, rosters of equipment/personnel etc. I believe the required information for you to begin your review process is included and that you will find it meets the requirements of the state.

I anticipate another presentation before the Baker County Court in mid-January at which time we will hold the second public review and discussion of the plan. Additional information gathered at this time will be submitted to you for consideration before final adoption. As you suggested I would like to request the automatic three month extension to cover submission of materials and review by your office during the first part of 1991.

Please feel free to contact me should you have questions or need additional information.

Sincerely,


James S. Brown
ASA Plan Coordinator

Eastern Oregon (503) 963-5265/ Central Oregon (503) 548-2659

OVERVIEW OF BAKER COUNTY

Baker County has an area of 3,089 square miles covering rugged terrain including Hells Canyon, the Wallowa, Elkhorn, Greenhorn and other mountain ranges. Much of the county is unpopulated and owned by the federal government. Established on September 22, 1862 Baker County has grown to a population of just over 16,000 people enjoying a climate with annual precipitation of 10.63 inches and a growing season nearly 160 days long.

Population centers include the county seat of Baker City, Sumpter, Halfway, Haines, Huntington, Durkee, Richland and Oxbow. Farming and ranching are centered in the lush valleys throughout the county, raising cattle, alfalfa hay, wheat and other cereal grains, along with dairy farms and other crops.

Industrial development is centered primarily in the Baker City area which is dominated by lumber mills, small manufacturing businesses and service industries. Timber is harvested from federal, state and private forestlands throughout the county and provides a seasonal employment base in most areas of the county.

Tourism is growing throughout the region and Baker County will play an integral part of future tourism development with the opening of the Oregon Trail Interpretive Center just outside of Baker City, near Interstate 84. Summer visitor traffic should increase dramatically, especially in conjunction with the celebration of the Oregon Trail in 1993.

The recreational opportunities currently offered in Baker County include hunting, fishing, skiing, and gold mining to name just a few. Major population increases from tourists are in the Summer and Fall. The major tourist traffic is centered along the interstate and secondary highways, but hunting, fishing and prospecting take visitors and residents alike into the rugged backcountry extending from Hells Canyon on the east to the Elkhorn range of the Blue Mountains to the west.

The topography of Baker County is largely high desert with irrigation throughout the valleys. The geography is varied and dominated by river drainages dissecting the county into deep canyons (Hells Canyon is the deepest in North America) and ridges creating watershed divides.

Baker County's transportation system is dominated by a large network of county roads, both paved and unpaved. Most farm roads in rural areas follow section lines while backcountry roads in the rangelands follow drainage patterns.

DEFINITIONS

"Advanced Life Support Units" means those units staffed by an Oregon-certified Emergency Medical Technician 3 or 4 as defined in ORS 823.020(8)(9).

"Ambulance" has the meaning given that term by ORS 823.020.

"Ambulance services" has the meaning given that term by ORS 823.305.

"Ambulance Service Area", or ASA, means a geographic area which is served by one ambulance service provider, and may include all or a portion of a county, or all or portions of two or more contiguous counties.

"Ambulance Service Area Plan", or ASA Plan, means a written document, which outlines a process for establishing a county emergency medical services system. A plan addresses the need for and the coordination of ambulance services by establishing ambulance service areas for the entire county and by meeting the other requirements of these rules.

"Basic Life Support (BLS) Units" means those units staffed by an Oregon-certified Emergency Medical Technician 1 or 2, as defined in ORS 823.020(6)(7).

"Communications System" means two-way radio communications between ambulances, dispatchers, hospitals and other agencies as needed.

"Division" means Oregon Health Division, Department of Human Resources.

"Effective provision of ambulance services" means ambulance services provided in compliance with the county ambulance service plan provisions for boundaries, coordination and system elements.

"Efficient provision of ambulance services" means effective ambulance services provided in compliance with the county ambulance service plan provisions for provider selection.

"Emergency" means any non-hospital occurrence or situation involving illness, injury or disability requiring immediate medical or psychiatric services, wherein delay in the provision of such services is likely to aggravate the condition and endanger

personal health or safety.

"Emergency medical services (EMS)" means those prehospital functions and services whose purpose is to prepare for and respond to medical emergencies, including rescue and ambulance services, patient care, communications and evaluation.

"Emergency Medical Technician 1 (EMT 1)" means a person certified by the Division as defined in ORS 823.020(6)(a)(b).

"Emergency Medical Technician 2 (EMT 2)" means a person certified by the Division as defined in ORS 823.020(7)(a)(b)(c).

"Emergency Medical Technician 3 (EMT 3)" means a person certified by the Division as defined in ORS 823.020(8)(a)(b).

"Emergency Medical Technician 4 (EMT 4)" means a person certified by the Division as defined in ORS 823.020(9)(a)(b).

"First Responder" means an individual who has successfully completed a 40-hour First Responder course and has passed a written examination administered by the Oregon State Health Division.

"Frontier" means the areas of the state that are not urban, suburban, or rural.

"Health Officer" means the County Health Officer.

"License" means the document issued by the Division to the owner of an ambulance when the vehicle is found to be in compliance with ORS 823.010 through 823.990 and OAR 333-28-000 through 333-28-130.

1995-682.015

682.

"Notification time" means the length of time between the initial receipt of the request for emergency medical service by either a provider or an emergency dispatch center (9-1-1), and the notification of all responding emergency medical service personnel.

"Patient" means an ill, injured, or disabled person who may be transported in an ambulance.

"Provider" means any public, private or volunteer entity providing EMS.

"Provider selection process" means the process established by the county for selecting an ambulance service provider or providers.

"Public Safety Answering Point* (PSAP)" has the meaning given by ORS 401.710(11).

"Quick Response Unit* (QRU)" means those units that have been

organized and sanctioned by the ASA Advisory Board for the purpose of reducing response time. These units are nontransporting, and provide patient care up to and including the scope of practice of their highest certified EMT.

"Response time" means the length of time between the notification of each provider and the arrival of each provider's emergency medical unit(s) at the incident scene.

"Rural" means an incorporated community of 2000-10,000 population which is not urban or suburban, and the area within a radius of 30 miles of that community's center.

"Suburban" means an area contiguous to an urban community which is not urban and which is contiguous to an urban community. It includes areas within a 10 mile radius of that community's center. It also includes areas beyond the 10 mile radius which have a population density of 1000 or more per square mile.

"Supervising Physician", or Physician Advisor, has the meaning provided in ORS 823.204.

"Urban" means an incorporated community of 10,000 or more population.

Huntington ASA

This area of Baker County has historically been served by the Ontario hospital and support services given by Malheur County. It has been agreed to by all parties that this historical relationship will continue and intergovernmental agreements are being drafted. They will be submitted as a part of the Baker County plan under supporting documents. See the Malheur County plan for specifics on the Huntington ASA.

Richland ASA

*Anthony Bond
893-6222*

*1st Tues
7:30
church*

Beginning at the Kettle Creek Forest Camp just south of the Eagle Cap Wilderness boundary and following the watershed divide south to the Eagle Creek road the boundary intersects highway 86 near the China Spring summit and proceeds southeasterly to the end of Sag road as it meets Brownlee Reservoir. Following the Snake River south to Soda Creek as its eastern boundary, the Huntington ASA boundary is defined by the Soda Creek drainage to Soda Lake and the watershed divide to the headwaters of Williams Creek where the boundary joins the Baker ASA.

Halfway ASA

Beginning at Brownlee Reservoir and the boundary with the Richland ASA the Snake River north to Brownlee Dam is the eastern boundary which then follows the watershed divide to the intersection of the North Pine Creek Road and the Copperfield highway. Following McLain Gulch and the watershed divides between the North Pine Creek Road and the Copperfield highway to the Wallowa/Baker county line in the Wallowa Whitman National Forest.

Oxbow ASA

Following the watershed divide between the Halfway ASA as it proceeds from Brownlee Dam north to the Wallowa County line (see description above in the Halfway ASA) the Oxbow ASA follows the Baker/Wallowa county line to the Snake River which forms the eastern boundary south to Brownlee Dam.

ASA MAPS AND BOUNDARIES

ASA MAPS WITH RESPONSE TIMES-Response time zone maps have been given to providers for development. Within Baker County only the Baker ASA contains an urban and suburban zone. (See attachments)

ASA NARRATIVE DESCRIPTION

Baker ASA

Beginning on Interstate 84 at milepost 330 near Nelson Point, by the Ash Grove Cement Plant the boundary between the Huntington ASA and Baker ASA runs west and is defined by the Burnt River Canyon. Those calls to the north of the canyon are within the Baker ASA. At the intersection of the Burnt River Canyon Road and Clark's Creek Road the boundary turns south and is defined by this road to Mormon Basin and the boundary between Baker and Malheur Counties. The county line running west toward Unity then forms the boundary between the Baker ASA and Vale ASA intersecting with U.S. highway 26 and proceeding northwesterly to Austin Summit. The county line between Grant and Baker counties forms the western boundary of the Baker ASA north to Anthony Lakes Ski Area and follows the forest service road down to the bottom of the access road. The North Powder River Road into the town of North Powder forms the boundary between the La Grande ASA to interstate 84 and then proceeds north to the Clover Creek intersection and then back to the Powder River as it drains into Thief Valley Reservoir. The area between Medical Springs and Eagle Creek defined along Forest Service road 67 is within the Baker ASA to the south as well as the area between Boulder Park and the mouth of East Eagle Creek. The east fork of Eagle Creek road south to the intersection with highway 86 forms the boundary between the Richland ASA and Baker ASA to a point near the Keystone Mine where the boundary turns south and follows the drainage of Upper Timber Canyon south to the headwaters of Williams Creek as it drains into Manning Creek. The Manning Creek road west to Interstate 84 closes the Baker ASA boundary with Huntington ASA near Nelson Point.

Blue mt.

MAPS DEPICTING 911, FIRE DISTRICTS AND INCORPORATED CITIES

Information is available from the Baker County Clerk and is submitted as attachments.

ALTERNATIVES CONSIDERED TO REDUCE RESPONSE TIMES

General:

A tiered response system network is utilized within Baker County to provide the very best available patient care and to maximize resources available through ambulance providers. The levels, or tiers, in the system are:

- 1) Quick Response Units staffed with either first responders or EMT 1's
- 2) BLS ambulance response units
- 3) ALS ground ambulance or Lifelight helicopter response units.

Quick response units where available, and basic life support units are dispatched simultaneously to 911 calls and the decision to request ALS ground or Lifelight helicopter assistance is addressed in system protocols.

NOTIFICATION/RESPONSE TIMES FOR PROVIDERS

Standards established by OAR 333-200-010 through 333-200-080 known as Trauma System Response Time Standards, have been adopted for use in this plan, except as noted. The Rule states that patients will receive prehospital care within the following parameters approximately 90 percent of the time. Urban-8 minutes, Suburban-15 minutes, Rural-45 minutes and Frontier-4.5 hours. It should be noted here that circumstances due to inclement weather conditions, e.g. snow, fog, icy roads and floods seriously impact these goals during certain parts of the year.

Notification and response times are monitored by the ASA Quality Assurance Committee as outlined elsewhere in this plan. The QA committee shall review these times and other system elements in accordance with administrative rules provided for by the Baker County Court.

The system elements are defined in detail on the next page.

SYSTEM ELEMENTS

Response Times-the length of time between the notification of each provider and the arrival of each provider's emergency medical service unit(s) at the incident scene.

Criteria-Notification time to arrival time shall be met by providers under the following time and population density/distance standards:

Urban means an incorporated community of 10,000 or more in population

Suburban means an area contiguous to an urban community which is not urban and includes areas within a 10 mile radius of that community's center. It also includes areas beyond the 10 mile radius which have a population density of 1,000 or more per square mile.

Rural means an incorporated community of 2,000-10,000 population which is not urban or suburban, and the area within a radius of 30 miles of that community's center.

Frontier means the area of the state that are not urban, suburban or rural.

Trauma system patients will receive pre-hospital care within the following parameters 90% of the time:

First Responders-BLS

1. Urban-8 minutes at 90%
2. Suburban-15 minutes at 90%
3. Rural-45 minutes at 90%
4. Frontier-up to 4.5 hours at 90%

Ambulance Providers-ALS

1. Urban-8 minutes at 90%
2. Suburban-15 minutes at 90%
3. Rural-45 minutes at 90%
4. Frontier-up to 4.5 hours at 90%

QUALITY ASSURANCE

The plan shall address and consider a quality assurance program which at the minimum:

- 1) Monitors compliance with pertinent statues, ordinances and rules;
- 2) monitors compliance with standards for prehospital provider notification, response and patient care;
- 3) Provides for problem resolution and legal sanctions for non compliant personnel or providers of the plan provisions.

Structure-Quality Assurance Coordinator is appointed upon recommendation of the EMS System Director and charged by the governing body to enlist representatives to the QA committee from the following:

Physician Supervisor of EMS

EMT/ALS Transport

— EMT/BLS First Response Representative

- Emergency Department Nurse

- Physician Specialists

Trauma Surgeon

Communications Center Representative

Levinger ←
Burns

Volunteer

Committee Responsibilities:

- 1) Review relevant documents and data for exemplary performances as well as problems; ?
- 2) Investigate complaints and referrals; —————
- 3) Interface with local health care providers, regional and state QA bodies;
- 4) Develop screens to audit problem areas;
- 5) Provide written statement of findings;
- 6) Assign responsibility for oversight of problems
- 7) Recommend appropriate action;
- 8) Follow recommendations to assure problem resolution;
- 9) Provide a semi annual report of all action taken.

Medical Supervision

A Physician Advisor will oversee all the providers standing orders, both BLS and ALS, which will be standardized as much as possible throughout all of Baker County.

On line medical supervision is provided by the Emergency Department physician at St. Elizabeth Hospital in Baker City via radio contact, or by telephone if needed. All units will transport to Baker City unless conditions dictate otherwise.

Retrospective supervision is provided by the QA mechanism, and by post-run critiques. The physician advisor also makes periodic visits to each unit to work on specific issues, problems, protocols and to review selected cases. Updates on new treatment techniques that affect emergency medical services will be given.

Patient Care Equipment

All ambulances providing patient care in Baker County and licensed by the Oregon State Health Division are equipped at the minimum, in accordance with the standards detailed in OAR-333-28-050 (1) (2).

All ambulances and quick response units are required to be equipped and supplied to enable the delivery of patient care up to and including the highest level of certification of any staff. If the ambulance or QRU is for any reason not able to equip and supply their unit for such a standard, they are required to submit a letter of restriction to the ASA advisory board, to be kept on file, stating their intent to limit their scope of practice to that which can be provided for in terms of equipment and supplies.

The practice of staffing a unit on a part time basis with EMT's certified to a higher level of care than is possible at other times does not construe a requirement that the unit provide the same level of care on a regular basis.

Please see attached lists of equipment as submitted.

TRAINING

Initial EMT instruction is provided by local instructors who are certified by a community college and use a curriculum that has been approved by the State Health Division.

Continuing education for personnel is maintained through in-house training programs and seminars plus educational classes that are sponsored by local operators. All providers in the county maintain continuing medical education and recertification standards as identified by the Oregon State Health Division and/or the Board of Medical Examiners.

Quality Assurance Structure

The Ambulance Service Area Advisory Committee shall make appointments for a term of three years, with the initial appointments divided into thirds to stagger terms. Reappointment will be at the discretion of the committee and vacancies filled by nomination from the committee as a whole or a subcommittee to develop a roster of qualified nominees.

The QA coordinator or designee shall act as executive secretary to the committee and provide liaison between the committee and the county. Accurate records of the activities and deliberations, recommendations and reports.

Interested parties may be invited to participate at any given time if their input is deemed to be of special value to the proceedings of the committee.

EMERGENCY COMMUNICATIONS SYSTEMS

Baker County is currently served by a 911 dispatch system operated by the Baker County Sheriff's Department located in Baker City. The Public Service Answering Points within Baker County serve all telephone prefixes in the county except as noted elsewhere. Dispatch procedures are included in the 911 system protocols.

Radio System

All ambulances and first response units licensed by the Oregon State Health Division and operating in Baker County shall be equipped as follows:

- 1) Mobile radio units shall be rated at no less than 45 watts and have the capability of communicating with the Baker County Sheriff and Oregon State EMS.
- 2) Portable units, i.e. hand held units, shall be rated at no less than 5 watts and have the capability of communicating with:

PSAP and Oregon State EMS

- 3) Pagers shall be equipped with the frequency of the units' PSAP.

Describe how coordination with county resources and the prehospital care and transportation providers is achieved.

See number 6 above.

Describe the process for obtaining out of county resources for prehospital care that exceed the capabilities of the county mutual aid agreements, include a list of resources.

Special Assistance is available at the following:

HAZARDOUS MATERIAL

Baker City Fire Station

Oregon State Police

County Emergency Services

SEARCH AND RESCUE

Baker County Sheriff's Department

SPECIALIZED RESCUE

Anthony Lakes Ski Patrol

EXTRICATION

Baker City Fire Department

EMERGENCY MEDICAL SERVICES ACCESS THROUGH CENTRALIZED TELEPHONE SYSTEM (911) PLUS DESCRIPTION OF DISPATCH STANDARDS AND PROCEDURES.

Description of the system and maps are included in the attached 911 communications plan to be activated in December 1990.

PROVIDER SELECTION

The county has the sole responsibility for designating and administering the process of selecting an ambulance service provider. The plan shall address and consider a Process for:

- 1) Assigning and reassigning of an ambulance service provider to an ASA
- 2) Responding to an application by a provider for an ASA
SEE ATTACHED FORMAT

HALFWAY/OXBOW AMBULANCE EMT'S

January 7, 1991

Ben Bishop I
Rt.1, Box 143
Halfway, OR 97834

Mike Romine II
P.O. Box 491
Halfway, OR 97834

Elsie Butler I
Walt Butler I
P.O. Box 388
Halfway, OR 97834

Bob Schudel I
Route 1, Box 37
Halfway, OR 97834

Mark Butler I
Box 254
Oxbow, OR 97840

Robin Zacccone II
Route 1, Box 78
Halfway, OR 97834

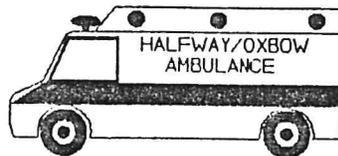
Susie Choules, R.N.
Box 266
Oxbow, OR 97840

Rosie Lindstrom II
P.O. Box 953
Halfway, OR 97834

George Dyke I
P.O. Box 860
Halfway, OR 97834

Judy Sanders RN
Route 1, Box 125
Halfway, OR 97834

Phillip Dyke II
P.O. Box 557
Halfway, OR 97834



George Hansen I
P.O. Box 444
Halfway, OR 97834

Zona Koopman I
Route 1, Box 27
Halfway, OR 97834

AMBULANCE INVENTORY

QUANTITY	ITEM
1	suction - throat catheter kit
48	suction bag liners
2	sterile burn sheets 60" x 90"
16	oval eye pads
21	styrofoam cups
	small trash bags
	freezer bags
2	emergency blankets
12	ammonia inhalants
10	sting-kill swabs
8	sterile pads
5	packages large sterile defib. pads
6	packages small sterile monitor pads
1	disposable razor
1	water proof ground pad
1	box tempa dot ready strips
1	disposable obstetrical kits
1	poison kit with ipecac and activated charcoal
2	bottles ipecac syrup, 1 oz.
2	tubes instant glucose
1	tube KY jelly
3/4	bottle rubbing alcohol
6	500 ml dextrose
3	1000 ml dextrose

1 1000 ml NaCl
 1 600 ml NaCl
 1 500 ml NaCl
 3 90" 10 drops/ml continu-flo solution set
 10 100" - 10 drops/ml continu-flo solution set
 2 100" - 60 drops/ml continu-flo solution set
 1 secondary set with 18 G needle - 15 drops/ml
 3 catheter needles: 18 G x 1 1/4"
 9 18 G x 2"
 3 16 G x 2"
 2 14 G x 2"
 1 suction catheter kits: 10 fr x 22"
 3 14 fr x 22"
 1 16 fr x 22"
 2 18 fr x 22"
 10 1 cc syringes, 28 G
 2 disposable blankets
 7 triangle bandages
 1 roll sterile aluminum foil 18" x 25"
 1 box sanitary napkins
 1 stretch gauze bandage: 2"x 126"
 6 3" x 5 yards
 1 4 1/2" x 36"
 4 4" x 5 yards
 10 2" x 5 yards
 3 6" x 5 yards
 1 2-ply 4" x 5 yards
 1 6-ply 4 1/2" x 6 yards

3 trauma dressing 10" x 30"
30 4" x 4" gauze
100 1" bandaids
40 bandaids, variety sizes
100 butterfly closures, variety sizes
5 boxes gauze bandages
12 rolls tape
50 surgical masks
3 disposable safety glasses
8 9" x 5" sterile dressing
1 8 x 7 1/2" dressing
3 9" x 5" dressings
5 2" x 3" transparent dressings
1 anaphylaxis kit
3 pediatric oxygen masks
5 adult oxygen masks
1 adult aerosol mask
1 adult rebreather mask
8 adult nasal cannulas
4 pediatric nasal cannulas
3 large cardboard splints
2 small cardboard splints
25 bite sticks
1 venoset 78 with cair clamp
1 ace bandage
1 oxygen tank, portable with valves and regulators
5 thermometers
3 stethoscopes

2 flashlights
3 sets long splint boards
1 pediatric extrication collar
1 small extrication collars
2 large extrication collars
1 short backboard
2 portable stretchers
11 cold packs
3 hot packs
1 surgi lift
4 pillows
4 blankets
6 sheets
1 sager traction splint
1 large hare traction splint
1 small hare traction splint
1 set extraction tools
1 anti-shock pants
1 urinal
1 bed pan
1 basin
1 hand and wrist arm splint
3 1/2 arm air splints
1 full arm air splint
2 1/2 leg air splint
1 full leg air splint
2 foot and ankle air splint
3 resuscitation airway kits

- 1 esophageal airway kit
- 4 bandage shears
- 5 leather restraining straps
- 2 soft restraining straps
- 1 aluminum eye shield
- 1 external defibrillator
- 2 rechargeable batteries for defibrillator
- 1 towel
- 4 towel rolls
- 1 K.E.D.
- 1 portable suction kit
- 1 resuscitator
- 1 emesis basin
- 3 adult blood pressure cuffs
- 1 wheeled cot with mattress
- 1 scoop stretcher
- 1 long backboard with restraining straps

Richland, Oregon
Jan. 7, 1991

Dear Mr. Brown,

Per telephone request for information about the Eagle Valley Ambulance System, here is a basic run down.

EMT's

Chandler	Elva	L.	EMT 1	119033	6-30-91
Graven	Tammy	J.	EMT 1	118560	6-30-91
Gullett	Wilma	M.	EMT 1	100567	6-30-91
Harlan	Vicky	L.	EMT 1	118562	6-30-91
Matheson	Patricia	J.	EMT 1	115022	6-30-91
Shold	Millie	L.	EMT 1	118566	6-30-91
Williams	Elma	A.	EMT 1	114751	6-30-91

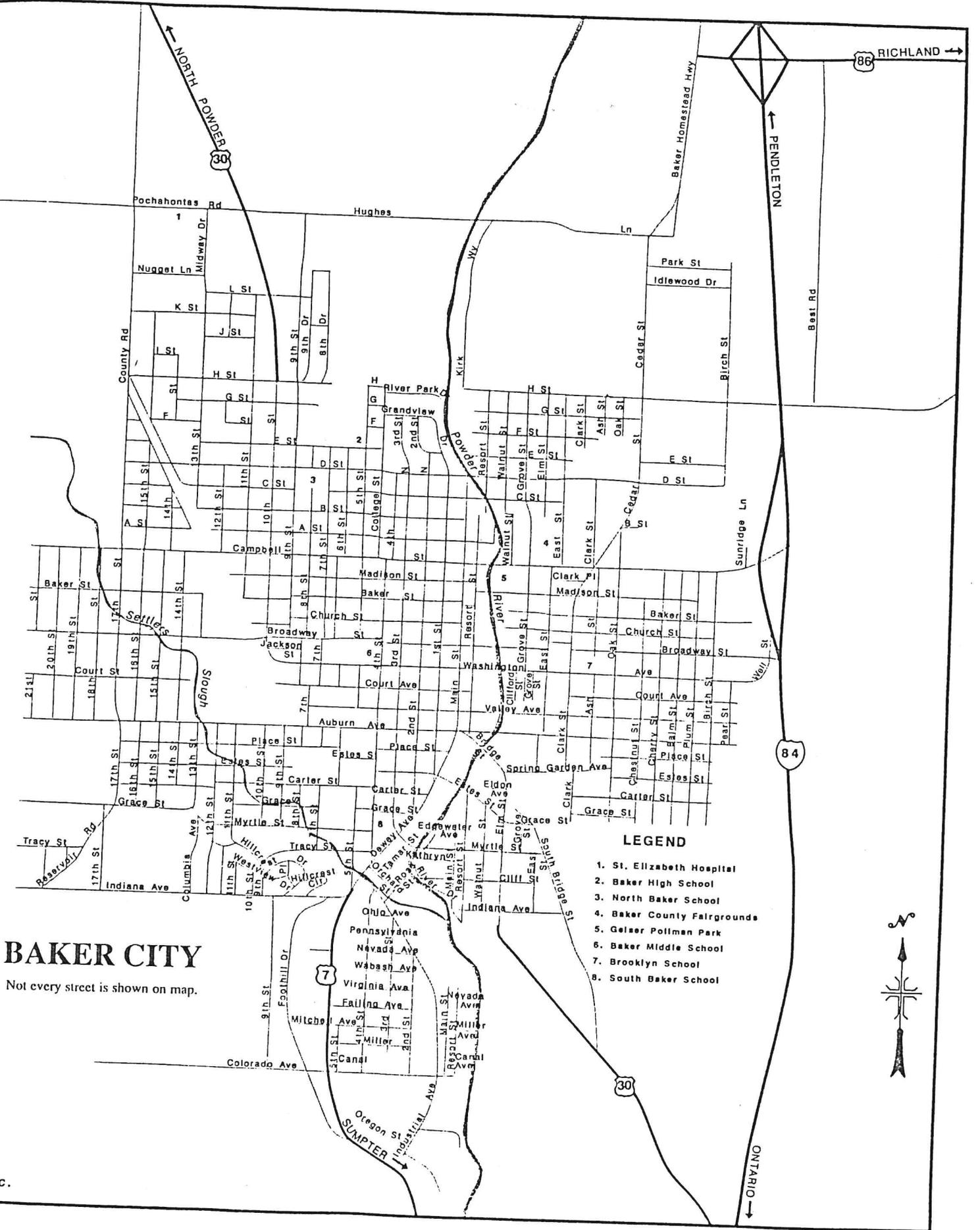
Dodge Van ground ambulance BLS
Located behind Eagle Valley Grange Hall-- 3rd and Main St., Richland,
Or.

Ambulance equipment:

Mechanical
Patient Care
Miscellaneous
Security and Rescue
Communication
Defibrillator
EMT 1 level, Personnel.
Long and short spine board.
KED

Hope this is satisfactory.
Sincerely,
Patricia Matheson

Patricia Matheson
P.O. Box 273 or 334
Richland, Or. 97870



BAKER CITY

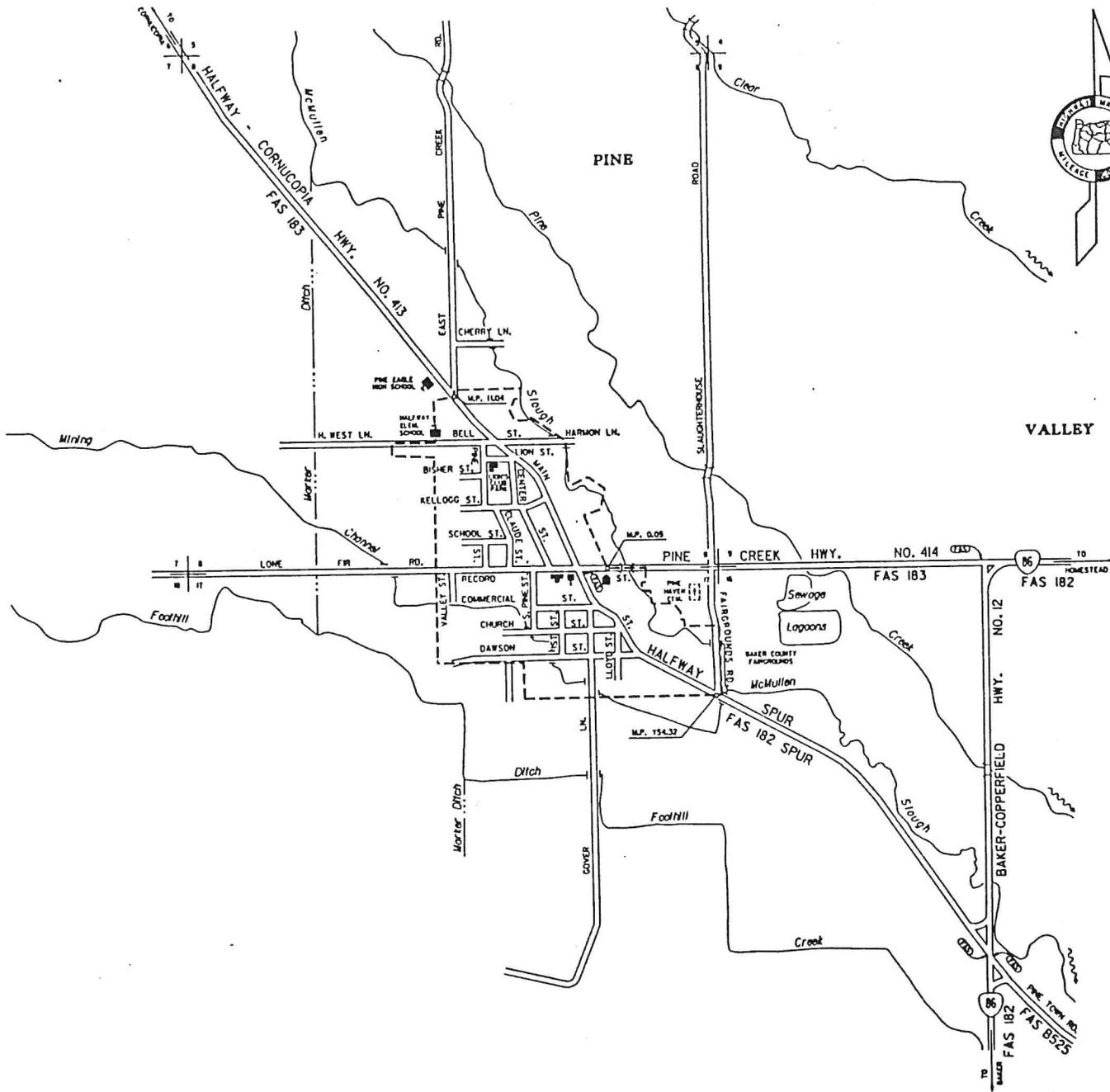
Not every street is shown on map.

LEGEND

- 1. St. Elizabeth Hospital
- 2. Baker High School
- 3. North Baker School
- 4. Baker County Fairgrounds
- 5. Gelsner Pollmen Park
- 6. Baker Middle School
- 7. Brooklyn School
- 8. South Baker School



s, Etc.



T B S R 46 E W.M.

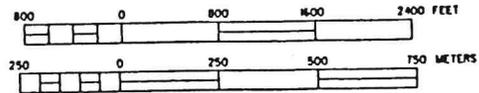
HALFWAY

BAKER COUNTY, OREGON
POPULATION 400

PREPARED BY THE
OREGON DEPARTMENT OF TRANSPORTATION
IN COOPERATION
U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL HIGHWAY ADMINISTRATION

JANUARY 1985

SCALE

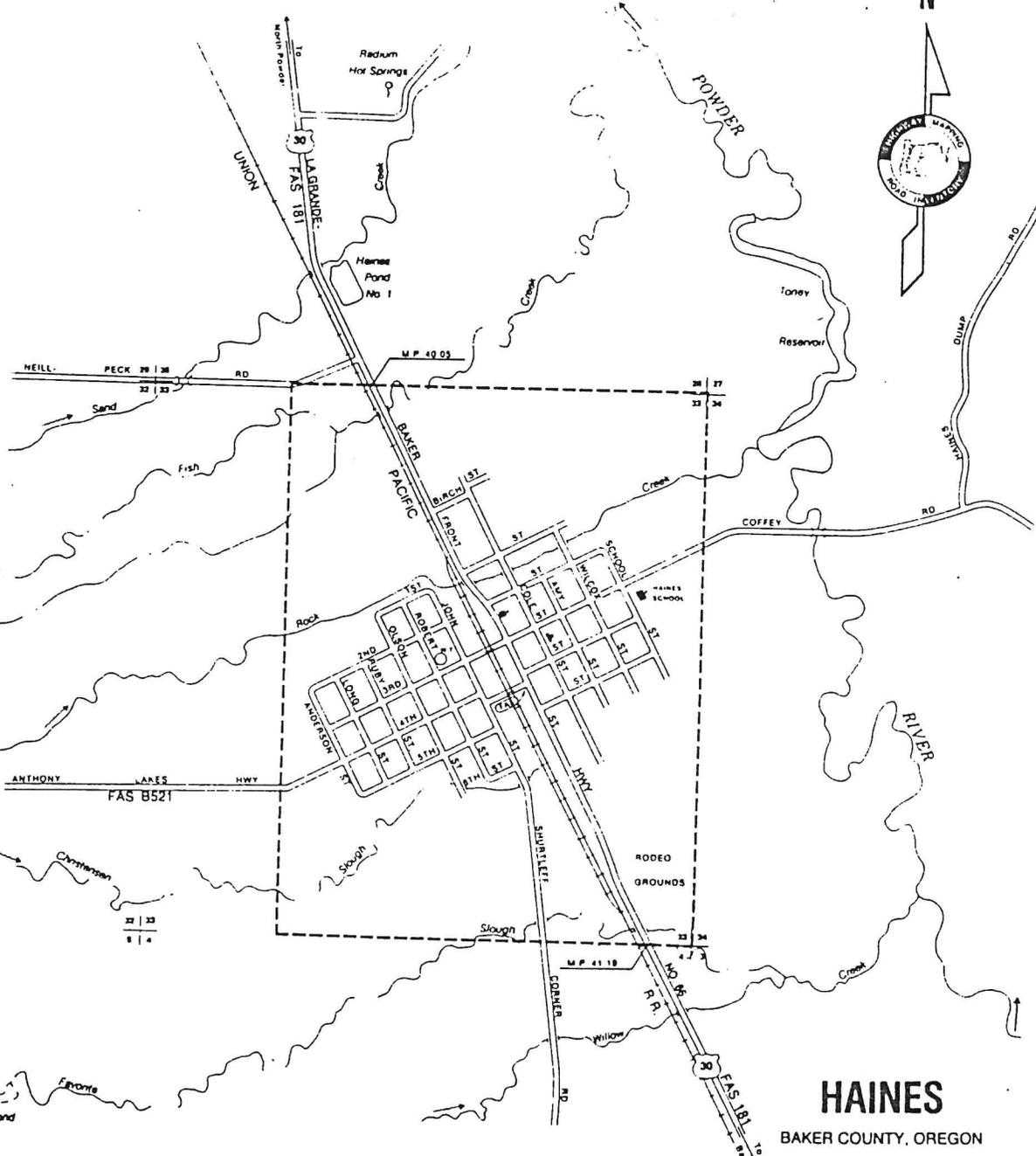


LEGEND

- INTERSTATE NUMBERED ROUTE
- U.S. NUMBERED ROUTE
- STATE NUMBERED ROUTE
- TERMINATION OF FA SYSTEM
- DIVIDED HIGHWAY
- STREET OPEN FOR TRAVEL
- POST OFFICE
- SCHOOL
- LIBRARY
- CITY LIMITS
- PUBLIC BUILDING
- COURT HOUSE
- CITY HALL
- ARMORY

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COMPUTER GENERATED SA/DC



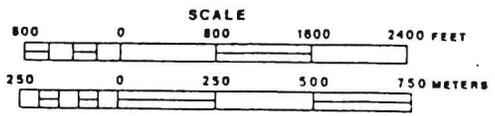
HAINES
 BAKER COUNTY, OREGON
 Population 355

PREPARED BY THE
 OREGON STATE HIGHWAY DIVISION
 IN COOPERATION WITH
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 FEDERAL HIGHWAY ADMINISTRATION

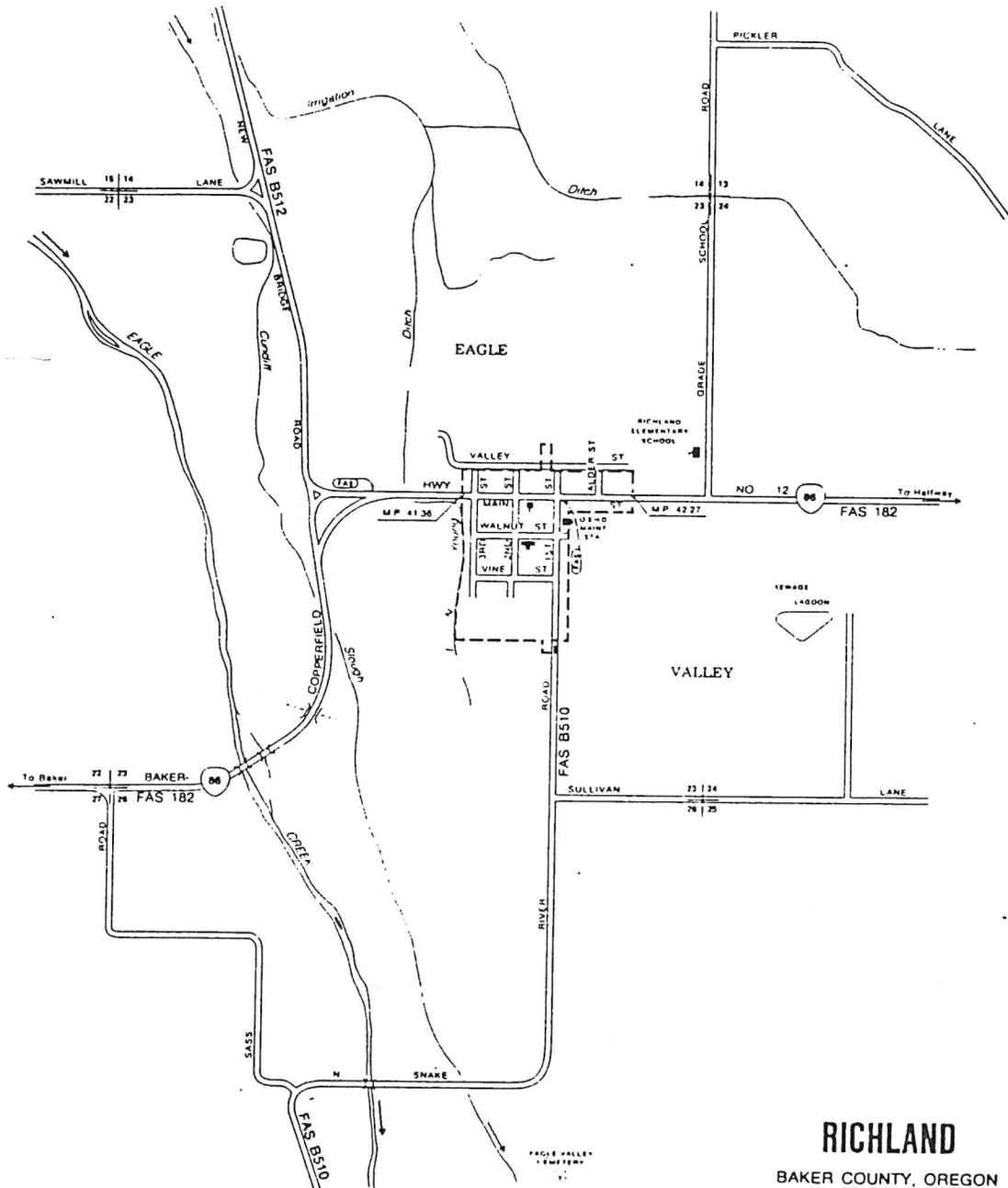
September 1983

T. 7-8 S. R. 39 E. W.M

- LEGEND**
- INTERSTATE NUMBERED ROUTE
 - U.S. NUMBERED ROUTE
 - STATE NUMBERED ROUTE
 - TERMINATION OF FA SYSTEM
 - DIVIDED HIGHWAY
 - STREET OPEN FOR TRAVEL
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 - CITY LIMITS
 - ARMORY



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RICHLAND
 BAKER COUNTY, OREGON
 Population 185

PREPARED BY THE
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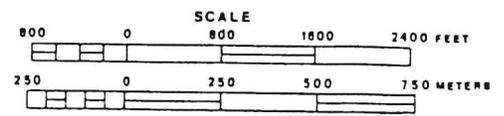
October 1982

T 9 S. R. 45 E. WM

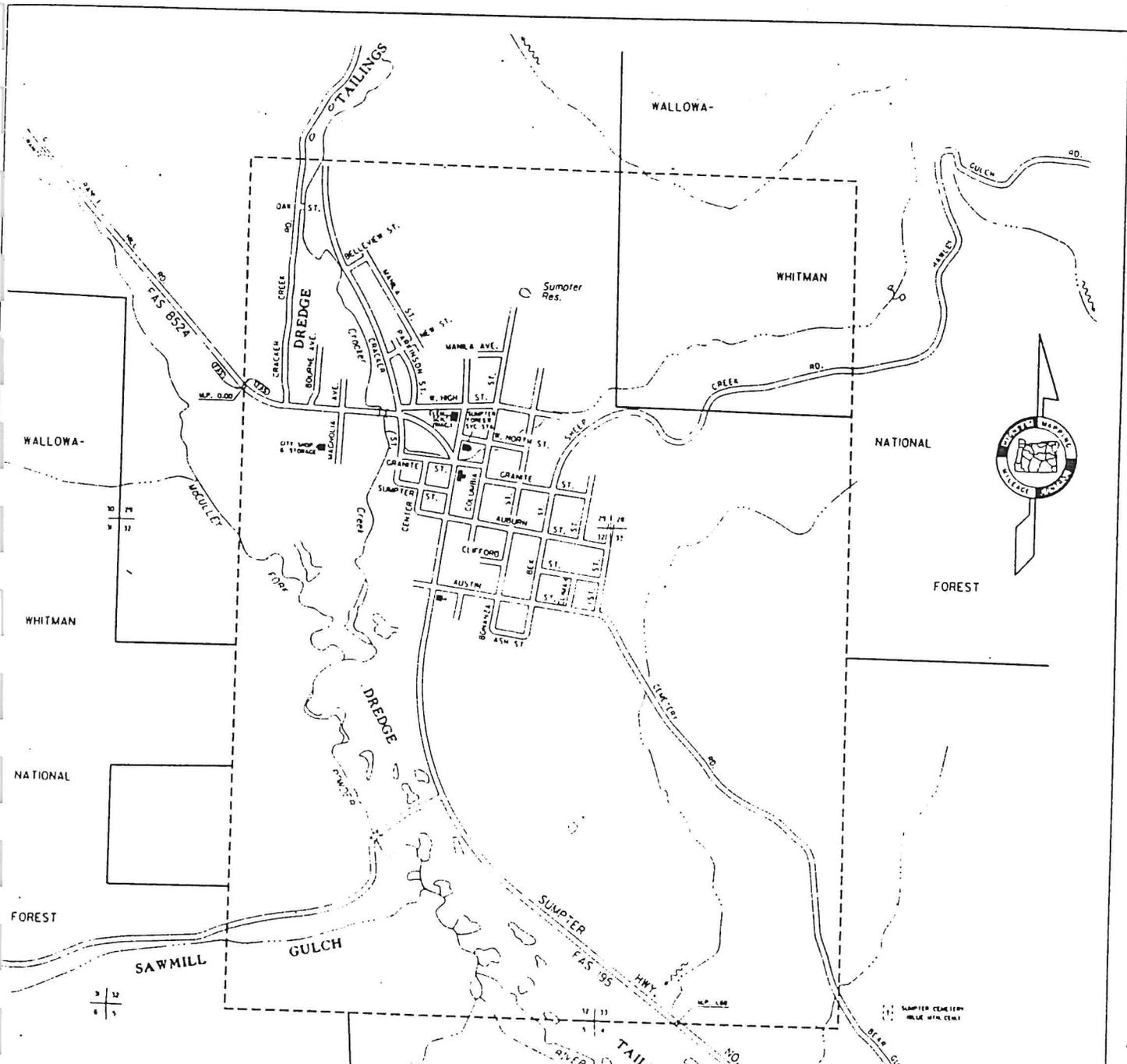
LEGEND

- INTERSTATE NUMBERED ROUTE
- U.S. NUMBERED ROUTE
- STATE NUMBERED ROUTE
- TERMINATION OF FA SYSTEM
- DIVIDED HIGHWAY
- STREET OPEN FOR TRAVEL

- POST OFFICE
- SCHOOL
- LIBRARY
- CITY LIMITS
- PUBLIC BUILDING
- COURT HOUSE
- CITY HALL
- ARMORY



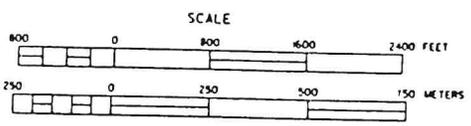
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T. 9-10 S. R. 37 E. W.M.

LEGEND

- INTERSTATE NUMBERED ROUTE
- U.S. NUMBERED ROUTE
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- STREET OPEN FOR TRAVEL
- POST OFFICE
- SCHOOL
- LIBRARY
- PUBLIC BUILDING
- COURT HOUSE
- CITY HALL
- ARMORY
- CITY LIMITS

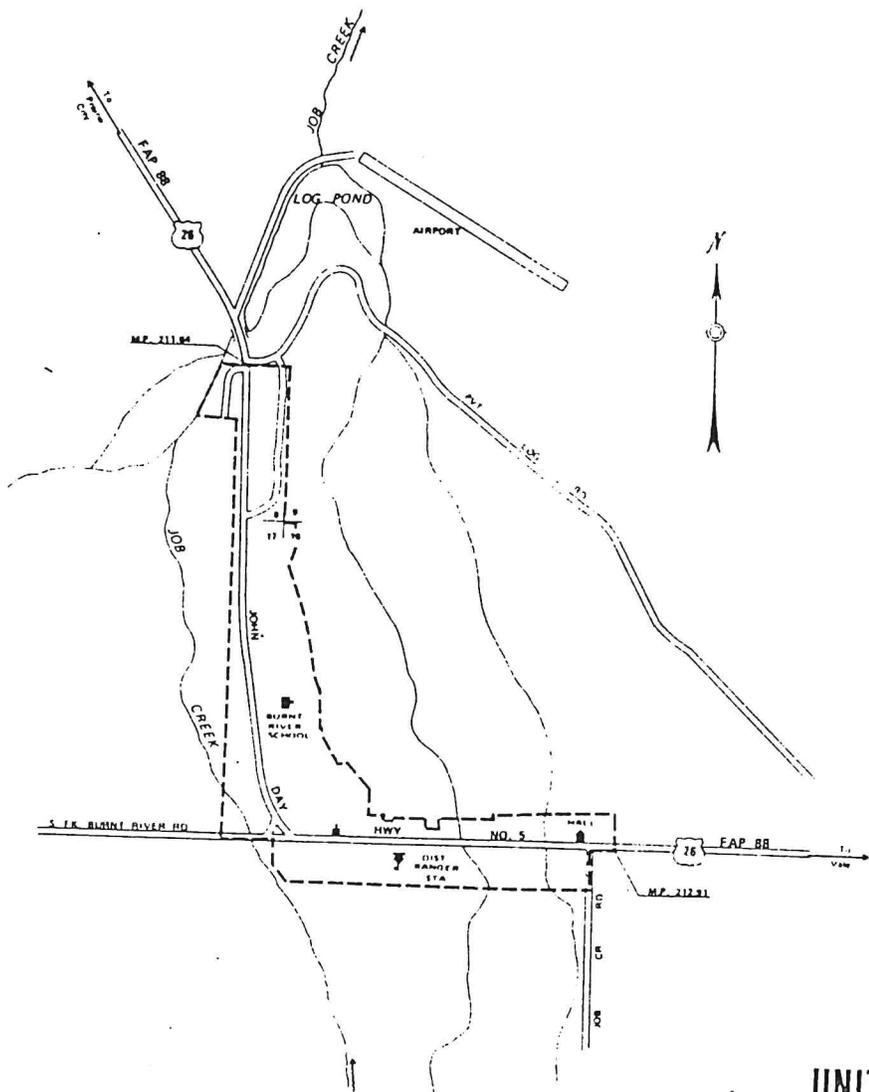


SUMPTER
 BAKER COUNTY, OREGON
 Population 150

PREPARED BY THE
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 FEDERAL HIGHWAY ADMINISTRATION
 APRIL 1986

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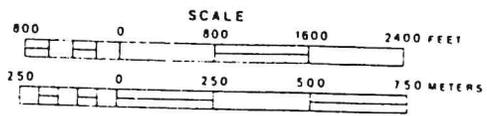
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UNITY
BAKER COUNTY, OREGON
 Population 116

PREPARED BY THE
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 FEDERAL HIGHWAY ADMINISTRATION

August 1981



- LEGEND**
- INTERSTATE NUMBERED ROUTE
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 - STATE NUMBERED ROUTE
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 - POST OFFICE
 - SCHOOL
 - CITY CENTER
 - CITY LIMITS
 - PUBLIC BUILDING
 - COURT HOUSE
 - CITY HALL
 - ARMORY
 - LIBRARY

17 16
 20 21

T 13 S R 37 E

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