



Agenda for the Board of Fire Commissioners

Regular Meeting

Conducted remotely via Zoom and with in-person attendance at Station 31

(1231 Franz ST SE, Lacey, WA 98516)

<https://zoom.us/j/743870521>

Meeting ID: 743 870 521

September 7th, 2023

5:30 pm

- I. CALL TO ORDER / FLAG SALUTE**
- II. APPROVAL OF THE AGENDA**
 - a. Additions / Deletions
- III. HEARING OF THE PUBLIC / MEMBERS PRESENT**
- IV. APPROVAL OF THE CONSENT AGENDA**
 - A. Draft Minutes of the August 17th, 2023, Board of Fire Commissioners Meeting.
 - B. Warrants (AP 9A 2023):
 - General Fund 001 (Acct #6630): EFTs numbered 5244 through 5253; checks numbered 23653 through 23679 for a total amount of \$638,388.87.
 - Equipment Repair and Replacement Fund 103: EFT number 5249 and check number 23666 for a total amount of \$5,484.19.
 - 2017B Capital Improvement Project Fund (2019A): EFTs number 5250 for a total amount of \$14,117.58.
 - C. Payroll 8B in the amount of \$563,086.08
- V. COMMITTEE REPORTS**
 - A. Thurston County Medic One
 - B. E.M.S. Council Commissioner Kirkbride
 - C. Thurston 9-1-1 Communications (TCOMM)
 - D. Administration Board Commissioner Roberts

- E. City / District Liaison
- F. Communication Updates Commissioner Roberts
- G. Thurston County Fire Commissioners Association
- H. Regular meeting Commissioner Kelling
- I. Thurston Regional Planning Council
- J. Status report Commissioner Hetzler
- K. Community Outreach
Status report Staff
- L. Capital Facilities and Equipment Activities Staff

VI. OLD BUSINESS

VII. NEW BUSINESS

- a. Policy P-520.2 Drug and Alcohol Misuse Prevention and Testing Program:
Staff Report & Proposed Adoption
- b. Policy P-521.2 DUI and Physical Control Arrests: Staff Report & Proposed
Adoption

VIII. ADMINISTRATIVE REPORT

IX. COMMISSIONER COMMENTS

X. OTHER INFORMATION

- A. Correspondence

XI. HEARING OF THE PUBLIC / MEMBERS PRESENT

XII. ADJOURNMENT

THERE WILL BE NO WORKSHOP CONDUCTED THIS EVENING.

Next Regular Meeting: September 21st, 2023 – 5:30 pm

THURSTON COUNTY FIRE DISTRICT THREE

BOARD OF FIRE COMMISSIONERS

MINUTES OF THE MEETING

August 17th, 2023

Commissioner Kirkbride
Commissioner Gamble
Commissioner Kelling
Commissioner Roberts

The meeting was held in person with limited attendance and is open to the public via the Zoom meeting platform. The meeting is being recorded.

Commissioner Hetzler was excused.

I. CALL TO ORDER

Chair Roberts called the meeting to order at 5:30 PM, followed with a salute to our Nation's Flag.

II. APPROVAL OF THE AGENDA

MOTION: To approve the agenda as published.

Motion: Commissioner Gamble
Second: Commissioner Kirkbride
Carried: Unanimous

III. HEARING OF THE PUBLIC /MEMBERS PRESENT

None.

IV. APPROVAL OF THE CONSENT AGENDA

A. Draft minutes of the August 3rd, 2023, meeting of the Board of Fire Commissioners.

B. Warrants:

- General Fund 001 (Acct #6630) EFTs numbered 5235 through 5240; checks numbered 23630 through 23652; and Draft 1180 for a total amount of \$78,011.65.
- Equipment, Repair and Replacement Fund 103: EFT number 5242 for a total amount of \$44.75.
- Capital Projects Fund 301: EFTs number 5243 and Draft 1181 for a total amount of \$301.22.

C. Payroll 8A in the amount of \$1,541,807.22.

MOTION: To approve the consent agenda as published.

Motion: Commissioner Kelling

Second: Commissioner Gamble

Carried: Unanimous

V. COMMITTEE REPORTS

A. Thurston County Medic One

No report – the August EMS meeting was canceled. Commissioner Kirkbride is the chair of the Comprehensive Planning Committee. In the meetings thus far, it has been determined that the update to the comprehensive plan cannot proceed until it is known what the hospitals are going to be doing. They have been invited to join. MultiCare is meeting with the Comprehensive Planning Committee on September 7th. St. Peter will likely be two weeks later.

B. Thurston 9-1-1 Communications (TCOMM)

No report – the next meeting is September 6th.

C. City/District Liaison

No report – the next meeting is not scheduled yet.

D. Thurston County Fire Commissioners Association

No report – the next meeting is XXXX

Commissioner Kelling reported on the annual potluck:

- It took place on August 15th. There were nine commissioners with seven districts represented. It was a very nice event.
- County Commissioner Edwards also attended, as well as two candidates who attended and spoke to the group.
- The next meeting is in September via Zoom. The October meeting will be at the county EOC building, with the hope of getting an overview of the emergency response system.

E. Thurston Regional Planning Council -

No report.

F. Community Outreach

Chief Schmidt shared:

- Ramping up and getting ready for school season. Chris DeBell has been reaching out to the schools and is working on planning for October. There are also many requests coming in from the community for different events.

G. Capital Facilities and Equipment Activities

Chief Frost shared:

- Photos were shared of the progress on the site for the building arrival. The current estimate is that the building will arrive on August 28th. The focus has been on the actual site for the footings. The base layer for the footings has been built. The rest of the foundation and the slab will be poured later next week.
- There were some problems with the native soils becoming unstable due to heat. Geotech engineers were involved to help fill some of the footings with a CDF material, which is a lightweight concrete, to stabilize everything before the heavy duty concrete goes down on top of it.
- The fire alarm plumbing was tested this morning and it passed.
- Aid 34 was delivered down to Braun last week, where it is preparing for a remount on a new chassis. The new chassis should be 30-45 days from delivery. Anticipated down time for the unit is around two months, with the hope of having it back in October.
- IT group has been working on the fiber project. Over the last couple of weeks, Station 33 and 34 were completely installed and completed. Station 32 still needs splicing to finish the project. It has been expensive to get fiber into Station 35. The initial cost estimate was quite high, so working on alternatives for that site.
- The reason for the fiber install is to get almost 10x the internet speed to the buildings for a much lower price.

VI. OLD BUSINESS

A. Levy Lid Restoration – 2023 Election Certification

- Chief Schmidt shared the official results.

VII. NEW BUSINESS

None.

VIII. ADMINISTRATIVE REPORT

Chief Schmidt reported:

- With the passing of the levy, moving forward with the hiring process. HR is very busy getting all the right people in the right places and working with finance to make sure funding is in place. The plan is to go forward with the hiring of 12 new firefighters to staff an additional aid unit in the new year.
- Looking at a promotion process for battalion chief in October. There are 11 candidates internally who have put in for that testing process, which will take place on October 24th and 25th.
- The REMS team is currently at the Bedrock fire near Eugene. There is another crew for turnover who will be going out there on Sunday to relieve the current crew. Also deploying another crew on a brush rig.

IX. COMMISSIONER COMMENTS

Commissioner Gamble – no comments.

Commissioner Kirkbride – shared about his aortic valve replacement. He had a subsequent collapse at home with then a BLS and then ALS response. His whole experience with the emergency crews was very good.

Commissioner Kelling – provided everyone with a flier on the Tenino City First Responder Annual Event on Saturday September 9th.

Commissioner Roberts – looking forward to lower temperatures.

X. CORRESPONDENCE

None.

XI. HEARING OF THE PUBLIC / MEMBERS PRESENT

None.

XII. ADJOURNMENT

The meeting adjourned as of 5:53 PM.

Next Regular Meeting: September 7th, 2023 – 5:30 p.m.

Available via remote meeting.

Chair

Vice Chair

Commissioner

Commissioner

Commissioner

ATTEST: District Secretary

All Bank Codes Check Summary

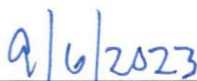
Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	44	27	0.00	442,760.65
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	17	10	0.00	215,229.99
	61	37	0.00	657,990.64

Fund Summary

Fund	Name	Period	Amount
001	General Fund	9/2023	638,388.87
103	Equipment Repair and Replacement Fund	9/2023	5,484.19
307	2017B Capital Improvement Project (2019A)	9/2023	14,117.58
			657,990.64

Authorization Signatures


 Signature Finance Director


 Date

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered or the labor performed as described, or that any advance payment is due and payable pursuant to a contract or is available as an option for full or partial fulfillment of a contractual obligation, and that the claim is a just, due and unpaid obligation against the district, and that I am authorized to authenticate and certify to said claims.


 Fire Chief

Chairman of the Board

Commissioner

Commissioner

Commissioner

Commissioner

Approval Date



Lacey Fire District 3, WA

My Check Report

By Check Number

Date Range: 09/07/2023 - 09/08/2023

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: 001-GENERAL FUND						
1605	AGB PROPERTIES LLC	09/08/2023	EFT	0.00	6,300.00	5244
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
September 2023	Invoice	09/07/2023	M2 Rent - September 2023	0.00	6,300.00	
	001-16-000-59101		Rent/Lease M2 Bldg Long		6,300.00	
1406	AMERICAN EXPRESS	09/08/2023	EFT	0.00	1,120.78	5245
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
August 2023	Invoice	09/07/2023	Fuel BR35 MOBES-West Hallett,Toothaker,	0.00	1,120.78	
	001-16-000-53201		Fuel - Fleet		70.35	
	001-16-000-53201		Fuel - Fleet		122.28	
	001-16-000-53201		Fuel - Fleet		107.60	
	001-16-000-53201		Fuel - Fleet		89.50	
	001-16-000-53201		Fuel - Fleet		82.29	
	001-16-000-53201		Fuel - Fleet		65.11	
	001-16-000-53201		Fuel - Fleet		77.14	
	001-16-000-53201		Fuel - Fleet		39.36	
	001-16-000-53201		Fuel - Fleet		40.11	
	001-16-000-53201		Fuel - Fleet		149.00	
	001-16-000-53201		Fuel - Fleet		124.73	
	001-16-000-53201		Fuel - Fleet		125.95	
	001-16-000-53201		Fuel - Fleet		27.36	
1596	CLARK, STACEY L	09/08/2023	EFT	0.00	2,925.00	5246
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
284	Invoice	09/07/2023	August 2023 Janitorial Service	0.00	2,925.00	
	001-16-000-54801		Facilities Repair and Main		2,925.00	
			August 2023 Janitorial Service			
589	FOSTER GARVEY PC	09/08/2023	EFT	0.00	1,260.00	5247
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
2862963	Invoice	09/07/2023	Legal Service - Levy Advice	0.00	1,260.00	
	001-12-000-54102		Legal Services		1,260.00	
1645	WEX BANK	09/08/2023	EFT	0.00	7,716.53	5248
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
91465986	Invoice	09/07/2023	Fuel - August 2023	0.00	7,716.53	
	001-00-000-36995		PCARD Rebates		-389.35	
	001-16-000-53201		Fuel - Fleet		8,105.88	
1560	CHARLES SCHWAB BANK	09/08/2023	EFT	0.00	146,689.46	5251
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
INV08520	Invoice	09/08/2023	Def Comp Amount - Decision Point - CSTC	0.00	71,074.38	
	001-00-000-22206		DCP Payable		71,074.38	
INV08526	Invoice	09/08/2023	Decision Point ROTH	0.00	71,338.45	
	001-00-000-22206		DCP Payable		71,338.45	
INV08527	Invoice	09/08/2023	Decision Point - LOAN	0.00	4,276.63	
	001-00-000-22206		DCP Payable		4,276.63	

My Check Report

Date Range: 09/07/2023 - 09/08/2023

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
1200	LOCAL 2903	09/08/2023	EFT	0.00	26,682.41	5252
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV08531	Invoice	09/08/2023	IAFF Dues	0.00	1,890.49	
	001-00-000-22302		Union Dues - Other Payab		1,890.49	
INV08533	Invoice	09/08/2023	L2903 Dues	0.00	21,441.80	
	001-00-000-22302		Union Dues - Other Payab		21,441.80	
INV08548	Invoice	09/08/2023	WSCFF Dues	0.00	3,350.12	
	001-00-000-22302		Union Dues - Other Payab		3,350.12	
1254	LOCAL 2903 PAC	09/08/2023	EFT	0.00	3,505.00	5253
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV08534	Invoice	09/08/2023	L2903 PAC	0.00	3,505.00	
	001-00-000-22301		UNION PAC Dues Payable		3,505.00	
50299	BEAULIEU, JEFFREY D	09/08/2023	Regular	0.00	720.78	23653
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
PPE Reimburse	Invoice	09/07/2023	Wildland and REMS	0.00	720.78	
	001-16-000-53111		PPE Boots/Pants			
	001-16-000-53112		Uniforms		394.20	
			PPE (Bunker Gear)		326.58	
50129	BROOKS, STEVEN K	09/08/2023	Regular	0.00	288.00	23654
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
FRI PerDiem	Invoice	09/07/2023	Fire Rescue Int. Conference 8/15-19/2023	0.00	288.00	
	001-11-000-54302		Travel Meals		64.00	
	001-11-000-54302		Travel Meals		64.00	
	001-11-000-54302		Travel Meals		48.00	
	001-11-000-54302		Travel Meals		48.00	
	001-11-000-54302		Travel Meals		64.00	
1630	CEROVSKI, MICHAEL	09/08/2023	Regular	0.00	288.00	23655
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
FRI Per Diem	Invoice	09/07/2023	Fire Rescue Int. Conference 8/15-19/2023	0.00	288.00	
	001-12-000-54302		Travel Meals		48.00	
	001-12-000-54302		Travel Meals		64.00	
	001-12-000-54302		Travel Meals		64.00	
	001-12-000-54302		Travel Meals		64.00	
	001-12-000-54302		Travel Meals		48.00	
704	CITY OF LACEY	09/08/2023	Regular	0.00	6,624.69	23656
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
17814	Invoice	09/07/2023	July 2023 - Fuel	0.00	6,624.69	
	001-16-000-53201		Fuel - Fleet		80.00	
	001-16-000-53201		Fuel - Fleet		6,509.91	
	001-16-000-53201		Fuel - Fleet		34.78	
706	CITY OF OLYMPIA	09/08/2023	Regular	0.00	25,841.58	23657
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
July 2023	Invoice	09/07/2023	Oly Shop Contract Jul-Aug. 2023	0.00	25,841.58	
	001-16-000-53109		Apparatus Parts and Supp		13,927.98	
	001-16-000-54809		Apparatus Maint - Olympi		11,913.60	
1695	ERIN JONES INCORPORATED	09/08/2023	Regular	0.00	6,000.00	23658

My Check Report

Date Range: 09/07/2023 - 09/08/2023

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
2023-0908 0918	Invoice	09/07/2023	Officer Development Training Guest Spea	0.00	6,000.00	
	001-11-000-54101		Professional Services		6,000.00	
1694	GORMAN, CHRIS	09/08/2023	Regular	0.00	288.00	23659
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
FRI Per Diem	Invoice	09/07/2023	Fire Rescue Int. Conference 8/15-19/2023	0.00	288.00	
	001-15-000-54302		Travel Meals		48.00	
	001-15-000-54302		Travel Meals		64.00	
	001-15-000-54302		Travel Meals		48.00	
	001-15-000-54302		Travel Meals		64.00	
	001-15-000-54302		Travel Meals		64.00	
1284	PALADIN BACKGROUND SCREENING	09/08/2023	Regular	0.00	308.00	23660
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
4134	Invoice	09/07/2023	Background Screenings - Ride-Along & Ne	0.00	308.00	
	001-14-000-54101		Professional Services		308.00	
369	SHUR-KLEEN CAR WASH, INC.	09/08/2023	Regular	0.00	76.50	23661
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
07.23.117	Invoice	09/07/2023	July 2023 Fleet Car Wash Service	0.00	76.50	
	001-16-000-54803		Apparatus Repair and Ma		-13.50	
	001-16-000-54803		Apparatus Repair and Ma		90.00	
216	THURSTON COUNTY CPED	09/08/2023	Regular	0.00	70.00	23662
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
351696	Invoice	09/07/2023	Fire Marshal Permit #10103292 LFD3 Mai	0.00	70.00	
	001-16-000-54902		Licenses, Dues and Fees		70.00	
252	VFIS	09/08/2023	Regular	0.00	445.00	23663
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
282647128	Invoice	09/07/2023	Insurance Premium - Vehicle Add Shop#	0.00	445.00	
	001-12-000-54600		Insurance		445.00	
1091	WA ST DEPT OF L&I, ELEVATOR SECTION	09/08/2023	Regular	0.00	114.10	23664
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
328007	Invoice	09/07/2023	Elevator Penalty Invoice	0.00	114.10	
	001-16-000-54902		Licenses, Dues and Fees		114.10	
1638	WEST COAST MECHANICAL SOLUTIONS, LLC	09/08/2023	Regular	0.00	459.90	23665
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
13898	Invoice	09/07/2023	S34 Water Heater Repair	0.00	229.95	
	001-16-000-54801		Facilities Repair and Main		229.95	
13945	Invoice	09/07/2023	S31 HVAC Service	0.00	229.95	
	001-16-000-54801		Facilities Repair and Main		229.95	
378	AMERICAN FAMILY LIFE	09/08/2023	Regular	0.00	560.45	23667
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
INV08519	Invoice	09/08/2023	AFLAC	0.00	560.45	
	001-00-000-22304		AFLAC Payable		560.45	

My Check Report

Date Range: 09/07/2023 - 09/08/2023

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
495	AWC EMPLOYEE BENEFITS TRUST	09/08/2023	Regular	0.00	26,608.54	23668
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV08523	Invoice	09/08/2023	Dental - Delta	0.00	21,528.02	
001-00-000-22202	Dental Insurance Payable	Dental - Delta	21,394.62			
001-22-000-52202	Dental Insurance	Dental - Delta	133.40			
INV08524	Invoice	09/08/2023	Dental - Willamette	0.00	64.32	
001-00-000-22202	Dental Insurance Payable	Dental - Willamette	64.32			
INV08532	Invoice	09/08/2023	Kaiser Permanente - LEOFF 1	0.00	1,443.24	
001-00-000-22201	Medical Insurance Payabl	Kaiser Permanente - LEOFF 1	1,443.24			
INV08547	Invoice	09/08/2023	VSP	0.00	3,572.96	
001-00-000-22203	Vision Insurance Payable	VSP	3,572.96			
608	DIMARTINO ASSOCIATES	09/08/2023	Regular	0.00	12,609.11	23669
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV08525	Invoice	09/08/2023	Disability	0.00	10,853.86	
001-00-000-22207	Disability/Life Insurance P	Disability	10,853.86			
INV08545	Invoice	09/08/2023	Supplemental Life	0.00	1,755.25	
001-00-000-22207	Disability/Life Insurance P	Supplemental Life	1,755.25			
29	EMPLOYMENT SECURITY	09/08/2023	Regular	0.00	16,584.21	23670
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV08553	Invoice	09/08/2023	WA CARES	0.00	3,600.61	
001-00-000-22107	WA CARES	WA CARE Tax Deduction	3,600.61			
INV08556	Invoice	09/08/2023	Paid Family and Medical Leave - Employer	0.00	3,536.40	
001-00-000-22106	Family & Medical Leave P	Paid Family and Medical Leave -	3,536.40			
INV08559	Invoice	09/08/2023	Paid Family and Medical Leave - Employee	0.00	9,447.20	
001-00-000-22106	Family & Medical Leave P	Paid Family and Medical Leave -	9,447.20			
649	ESPYR	09/08/2023	Regular	0.00	287.24	23671
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV08528	Invoice	09/08/2023	Employee Assistance Program	0.00	287.24	
001-00-000-22204	EAP Payable	Employee Assistance Program	258.85			
001-11-000-52204	Employee Assistance Pro	Employee Assistance Program	6.68			
001-14-000-52204	Employee Assistance Pro	Employee Assistance Program	10.85			
001-21-000-52204	Employee Assistance Pro	Employee Assistance Program	10.86			
1121	GUARANTEED EDUCATION TUITION PROGRAM	09/08/2023	Regular	0.00	272.00	23672
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV08529	Invoice	09/08/2023	Guaranteed Education Tuition Program	0.00	272.00	
001-00-000-22305	GET Payable	Guaranteed Education Tuition P	272.00			
923	LABOR & INDUSTRIES	09/08/2023	Regular	0.00	109,545.07	23673
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
INV08549	Invoice	09/08/2023	6992 - Firefighter EE	0.00	15,009.66	
001-00-000-22103	Labor & Industries Payabl	6992 - Firefighter EE	15,009.66			
INV08550	Invoice	09/08/2023	6992 - Firefighter ER	0.00	93,089.67	
001-00-000-22103	Labor & Industries Payabl	6992 - Firefighter ER	93,089.66			
001-22-000-52103	Labor and Industries	6992 - Firefighter ER	0.01			
INV08552	Invoice	09/08/2023	VSS24 Volunteers	0.00	153.96	
001-00-000-22103	Labor & Industries Payabl	VSS24 Volunteers	153.96			
INV08555	Invoice	09/08/2023	Commissioners - EE	0.00	2.93	

My Check Report

Date Range: 09/07/2023 - 09/08/2023

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
	001-00-000-22103	Labor & Industries Payabl	Commissioners - EE		2.93	
INV08557	Invoice	09/08/2023	Admin/Clerical - ER	0.00	449.69	
	001-00-000-22103	Labor & Industries Payabl	Admin/Clerical - ER		449.69	
INV08558	Invoice	09/08/2023	VSS Volunteers	0.00	6.73	
	001-00-000-22103	Labor & Industries Payabl	VSS Volunteers		6.73	
INV08560	Invoice	09/08/2023	Commissioners - ER	0.00	5.52	
	001-00-000-22103	Labor & Industries Payabl	Commissioners - ER		5.52	
INV08561	Invoice	09/08/2023	NOC Other - ER	0.00	492.50	
	001-00-000-22103	Labor & Industries Payabl	NOC Other - ER		492.50	
INV08562	Invoice	09/08/2023	Admin/Clerical - EE	0.00	239.19	
	001-00-000-22103	Labor & Industries Payabl	Admin/Clerical - EE		239.19	
INV08564	Invoice	09/08/2023	NOC Other - EE	0.00	95.22	
	001-00-000-22103	Labor & Industries Payabl	NOC Other - EE		95.22	
1150	METLIFE	09/08/2023	Regular	0.00	11,437.46	23674
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number		Account Name		Distribution Amount	
INV08565	Invoice	09/08/2023	LTC FOR W. PIERPOINT	0.00	11,437.46	
	001-21-000-52209		LEOFF 1 Retiree Benefits		11,437.46	
457	NATIONWIDE RETIREMENT SOLUTN	09/08/2023	Regular	0.00	2,769.55	23675
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number		Account Name		Distribution Amount	
INV08521	Invoice	09/08/2023	Deferred Comp Amount - NRS	0.00	2,769.55	
	001-00-000-22206		DCP Payable		2,769.55	
1634	OREGON DEPARTMENT OF JUSTICE	09/08/2023	Regular	0.00	1,004.00	23676
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number		Account Name		Distribution Amount	
INV08530	Invoice	09/08/2023	G-SUPP OREGON	0.00	1,004.00	
	001-00-000-22307		Child Support Payable		1,004.00	
303	STANDARD INSURANCE CO	09/08/2023	Regular	0.00	361.56	23677
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number		Account Name		Distribution Amount	
INV08544	Invoice	09/08/2023	Standard Life Insurance	0.00	361.56	
	001-00-000-22207		Disability/Life Insurance P		286.22	
	001-11-000-52207		Disability/Life		34.54	
	001-14-000-52207		Disability/Life		20.40	
	001-21-000-52207		Disability/Life		20.40	
287	TRUSTEED PLANS SVS CORP	09/08/2023	Regular	0.00	209,400.95	23678
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number		Account Name		Distribution Amount	
INV08543	Invoice	09/08/2023	PPO 100	0.00	206,265.95	
	001-00-000-22201		Medical Insurance Payabl		204,565.01	
	001-22-000-52201		Medical Insurance		1,700.94	
INV08546	Invoice	09/08/2023	Traditional Plan	0.00	3,135.00	
	001-00-000-22201		Medical Insurance Payabl		3,135.00	
1168	WSCFF EMPLOYEE BENEFIT TRUST	09/08/2023	Regular	0.00	9,225.00	23679

My Check Report

Date Range: 09/07/2023 - 09/08/2023

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
	Account Number	Account Name	Item Description	Distribution Amount		
INV08537	Invoice	09/08/2023	MERP	0.00	9,225.00	
	001-00-000-22303	MERP Payable	MERP		9,225.00	

Bank Code 001 Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	43	26	0.00	442,189.69
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	12	8	0.00	196,199.18
	55	34	0.00	638,388.87

My Check Report

Date Range: 09/07/2023 - 09/08/2023

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
738	FIRECOM / SONETICS CORPORATION	09/08/2023	EFT	0.00	4,913.23	5249

Bank Code: 103-EQUIPMENT REPAIR & REPLACE

Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount
INV346449	Invoice	09/07/2023	New AU34 Headsets and Parts	0.00	4,913.23
	103-00-000-56141		Replacement Vehicles		4,913.23

Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount
8/18/2023	Invoice	09/07/2023	CH36 Striping	0.00	570.96
	103-00-000-56141		Replacement Vehicles		570.96

Bank Code 103 Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	1	1	0.00	570.96
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	1	1	0.00	4,913.23
	2	2	0.00	5,484.19

My Check Report

Date Range: 09/07/2023 - 09/08/2023

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: 307-2017B	CAPITAL PROJECTS FUND					
1232	RICE FERGUS MILLER INC	09/08/2023	EFT	0.00	14,117.58	5250
Payable #	Payable Type	Post Date	Payable Description	Discount Amount	Payable Amount	
Account Number	Account Name	Item Description	Distribution Amount			
2017111.03-024	Invoice	09/07/2023	VRF Facility Improvements 2017111.03-0	0.00	7,036.77	
307-00-510-56121	Facility Capital Projects V	VRF Facility Improvements 2017	7,036.77			
2017111.03-025	Invoice	09/07/2023	VRF Facility Improvements - 2017111.03-	0.00	6,740.81	
307-00-510-56121	Facility Capital Projects V	VRF Facility Improvements - 201	6,740.81			
2017111.04-004	Invoice	09/07/2023	St. 33 Remodel Project Cost Est. 2017111.	0.00	85.00	
307-00-330-56121	Facility Capital Projects St	St. 33 Remodel Project Cost Est.	85.00			
2017111.04-005	Invoice	09/07/2023	ST33 Remodel Project Cost Est. 2017111.	0.00	255.00	
307-00-330-56121	Facility Capital Projects St	ST33 Remodel Project Cost Est.	255.00			

Bank Code 307 Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	0	0	0.00	0.00
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	4	1	0.00	14,117.58
	4	1	0.00	14,117.58

THURSTON COUNTY FIRE DIST. #3
MASTER PAYROLL LIST

Payroll Period 08B-2023

DIRECT DEPOSIT - KEY BANK	479,960.21
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KEY BANK FUNDS TRANSFER TO IRS FED INCOME TAX DEPOSIT	67,029.69
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KEY BANK FUNDS TRANSFER TO IRS MEDICARE DEPOSIT	16,096.18
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KEY BANK FUNDS TRANSFER TO IRS SOCIAL SECURITY DEPOSIT	0.00
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TAX DEPOSIT TOTAL	83,125.87
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TOTAL PAYROLL	563,086.08
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Title:	Drug and Alcohol Misuse Prevention and Testing Program	
Type:	POLICY	Adopted: June 2019
Section:	PERSONNEL	Revised: September 2023

P-520.2

Drug and Alcohol Misuse Prevention and Testing Program

I. OVERVIEW/PURPOSE/SCOPE

The District is committed to maintaining a safe and healthy work environment for its Members. Misuse of drugs and alcohol, and illegal use of drugs is a clear threat to the safety and health of Members and undermines public confidence in the District. This program establishes the expectation for education for Members and for drug and alcohol testing.

II. POLICY

Lacey Fire District 3 is a drug and alcohol - free workplace. All entry-level responder candidates are subject to pre-employment drug screening. Members are subject to additional drug and alcohol testing in accordance with the parameters below.

III. DEFINITIONS

Designated employer Representative (DER) - a person or persons designated by the District to receive communications and test results from service agents and who is /are authorized to take immediate action to remove Members from safety sensitive duties. A DER is also authorized to make required decisions in testing and evaluation processes.

Reasonable suspicion – the specific, contemporaneous, and articulable observations of the Member's appearance, behavior, speech, or body odor.

IV. PRINCIPLES and GUIDELINES

- A. The Designated Employer Representatives (DERs) are the Deputy Chiefs, the Assistant Chief of Health and Safety and the Human Resources Director.
- B. All entry-level or lateral-hire emergency responder candidates are subject to pre-employment drug testing.
- C. The District conducts drug and/or alcohol testing for reasonable suspicion, and as directed by a Substance Abuse Professional (SAP).
- D. Members are subject to law enforcement investigations involving District vehicle collisions, which may include post collision drug and/or alcohol testing.
- E. Members who operate under a CDL are additionally subject to random drug and alcohol testing.
- F. The District will provide drug and alcohol misuse education and training to Members and those who supervise Members.



Title:	Drug and Alcohol Misuse Prevention and Testing Program	
Type:	POLICY	Adopted: June 2019
Section:	PERSONNEL	Revised: September 2023

P-520.2

- G. Members may not engage in prohibited conduct relating to alcohol and/or drugs. Consequences for engaging in prohibited conduct include discipline up to and including separation / termination. The following are considered prohibited conduct:
1. Reporting to duty with a quantifiable presence of a prohibited drug in the body above minimum thresholds as established by industry standards or having an alcohol concentration of 0.02 or greater.
 2. Consumption/use of alcohol or illegal drugs, or misuse of legal drugs while on duty or scheduled on-call.
 3. Use of legally prescribed drugs with side effects which might impair the Member's ability to perform all requirements of the position fully and safely without prior notification to the immediate supervisor. See Drug and Alcohol-Free Workplace Policy.
 4. Manufacture, distribution, dispensing, possession, or use of controlled substances while on duty. Law enforcement shall be notified as appropriate where criminal activity is suspected.
 5. Consuming alcohol within 8 hours of a collision involving a District vehicle, or until post-accident testing is completed, whichever comes first.
 6. Failure to pass a drug/ alcohol test, failure to comply with a testing request, providing false information related to testing or validation, or falsifying test results.
- H. Members suspected of engaging in prohibited conduct are relieved from duty until the Member successfully completes a Substance Abuse Professional (SAP) evaluation and any referral, education and/or treatment program recommended by the SAP.
- I. The District recognizes the privacy due to Members and, except as otherwise provided in 49 CFR 40.321, pursuant to a written agreement or other lawful process, shall not release individual test results or medical information about a Member to third parties without the Member's written consent.
- J. Records will be maintained in the Member's confidential medical file for the period(s) required by law.
- K. Required Testing
1. Pre-employment
 - a. All entry-level and lateral-hire emergency responder candidates receive a pre-employment drug test. The District must receive a negative test result.
 - b. All new-hire administrative staff including administrative volunteers do not receive a pre-employment drug test.



Title:	Drug and Alcohol Misuse Prevention and Testing Program	
Type:	POLICY	Adopted: June 2019
Section:	PERSONNEL	Revised: September 2023

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- c. For drivers who operate under a CDL, the District will check with previous employers for the past two years for a DOT drug and alcohol testing history. Reference Federal Motor Carrier Safety Administration (FMCSA).
 - 2. Random
 - a. Drivers who operate under a CDL are required to participate in unannounced random drug and alcohol testing. The District will participate in a drug/alcohol testing pool for random testing.
 - b. Random (follow up) testing will be conducted as directed or ordered by a Substance Abuse Professional.
 - 3. Reasonable suspicion
 - a. Members will be required to submit to an alcohol and/or drug test when the District has reasonable suspicion to believe they are under the influence of alcohol or a drug.
 - 4. Post Collision

All District Members are subject to and will cooperate with law enforcement post-collision investigations. This may include drug and/or alcohol testing.
 - 5. Return to Duty Testing
 - a. Any Member who has violated any of the prohibitions of the Drug and Alcohol Misuse Prevention and Testing policy must submit to a return to duty test before returning to his/her position (49 CFR 40.305).
 - b. The test must indicate an alcohol concentration of < 0.02 and/or a verified negative result on a drug test.
 - c. Return to duty includes unannounced testing for CDL holders per federal/State guidelines.
 - d. In addition, the Member may be subject to follow-up testing if required by the Substance Abuse Professional (SAP)'s written follow up plan.
 - 6. Follow Up Testing

The type (drug and/or alcohol) and number of follow-up tests is determined by the SAP and may continue for up to 5 years.
 - L. Substance Abuse Professional (SAP) Evaluation
 - 1. The District will provide a listing of approved SAPs to affected Members; the Member must have an SAP evaluation before returning to duty.
 - 2. The payment of the SAP and any subsequent evaluation, education, treatment and /or testing is determined by the Members' current health care benefits and /or the collective bargaining agreement. (49 CFR 40.287 and 40.289 (b)).
 - 3. The SAP evaluation must include (49 CFR 40.293)
 - a. A comprehensive face to face assessment and clinical evaluation
 - b. A recommended course of education and/or treatment with which the Member must demonstrate successful compliance prior to returning to duty.



Title:	Drug and Alcohol Misuse Prevention and Testing Program	
Type:	POLICY	Adopted: June 2019
Section:	PERSONNEL	Revised: September 2023

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- c. A written report directly to the DER highlighting specific recommendations for assistance
- d. Consultation with the medical review officer if the SAP determines it is necessary or prudent to do so as part of the evaluation.

M. Training and Education

1. The District shall provide educational and information materials that explain the drug-free workplace and the drug and alcohol testing program to each Member affected by the policy prior to the start of alcohol and drug testing for that Member, except for pre-Membership testing.
2. The District shall provide awareness training on drug and alcohol misuse. District supervisors shall receive additional training on substance misuse.

N. Recordkeeping

1. The following records will be maintained in the Members confidential medical file for a minimum of five years and thereafter purged or destroyed in accordance with established records retention schedules (49 CFR 40.333)
 - a. Records of a Member's alcohol test results indicating an alcohol concentration of greater than or equal to 0.02
 - b. Records of any verified positive drug test result
 - c. Documentation of refusals to take required alcohol and/or drug tests
 - d. SAP reports
 - e. All schedules for follow-up tests and results
2. Member Records of cancelled drug test, negative drug test results and alcohol test results with a concentration of < 0.02 will be retained for a minimum of one year and thereafter purged or destroyed in accordance with established records retention schedules (49 CFR 40.333)

V. RELATED DOCUMENTS

A-105 Drug and Alcohol Free Workplace Policy
O-416 Collisions Involving District Vehicles
Forms – Medication Assessment Request



Title:	DUI and Physical Control Arrests	
Type:	POLICY	Adopted: June 2019
Section:	PERSONNEL	Revised: September 2023

P-521.2

DUI and Physical Control Arrests

I. OVERVIEW/PURPOSE/SCOPE

The public expects that persons who drive emergency apparatus conform to high standards of conduct relative to driving emergency vehicles and apparatus. Driving under the influence and physical control under the influence charges may take more than a year to adjudicate and are processed through the Department of Licensing as well as the judicial system with both systems maintaining their own requirements. Therefore, the District must establish expectations for how the District will manage an off- duty DUI/physical control under the influence arrest.

II. POLICY

Members who drive a District vehicle must report an off-duty DUI / physical control of a vehicle under the influence arrest within 72 hours and before their next work shift.

III. DEFINITIONS

District vehicle – any vehicle owned or primarily operated by the district; this includes Medic Vans.

DUI – driving under the influence – driving a vehicle while under the influence of intoxicating liquor, marijuana, or any drug (RCW 46.61.502).

Physical control of vehicle under the influence – the person has actual physical control of a vehicle, or in physical control of a vehicle, while under the influence of intoxicating liquor, marijuana, or any drug.

Serious injury – injury requiring hospitalization.

IV. PRINCIPLES and GUIDELINES

- A. For an arrest where the off-duty District Member has been involved in an at-fault injury collision, the option to retain the Member is solely the District's.
- B. For a first arrest for DUI / physical control of a vehicle under the influence, a Member will be eligible for continued employment if the following conditions are met:
 1. The accident did not involve serious injury or death to another person.
 2. The Member reports in writing (via email or hardcopy letter) the arrest per policy (before the next work shift and within 72 hours). Provide documentation of the arrest from the arresting agency as soon as it is available. If unable to make written notification within the required timeline, the Member will notify a chief officer verbally with a follow up for the written documentation.
 3. If or when the Member's driver's license is suspended, the Member notifies the District before his/her next work shift.
 4. The Member shall comply with all requirements of a criminal court order and licensing authority from the jurisdiction in which the citation occurred and any



Title:	DUI and Physical Control Arrests	
Type:	POLICY	Adopted: June 2019
Section:	PERSONNEL	Revised: September 2023

P-521.2

Washington State agency if applicable. The Member shall also complete an evaluation by and comply with all requirements of a Substance Abuse Professional (SAP). All associated costs are at the Member's expense. The Member shall provide all documentation associated with the requirements within 72 hours of assignment and completion. Such documentation may include:

- a. Required Counseling.
 - b. Required Education.
 - c. Required Testing and Evaluation.
5. In addition to the items required above, the Member shall meet confidentially at least once with the District's Support Services Division within 30 days of the arrest or citation.
- C. A Member may not perform work if their drivers' license is suspended by any state or territory, and they have not received a work-related exemption and a restricted license or permit deemed valid by the State of Washington. While the Member is restricted from working, accrued Sick Leave may be used if the Member is receiving drug/alcohol or related treatment. Accrued Annual Leave, unused Personal Holidays and/or leave without pay (LWOP) may be used if the Member is not receiving treatment for up to 90 days. After 90 days of inability to work, the Member is subject to the outcome of a disciplinary process.
- D. Members who receive authorization to drive with a restricted license must comply with all requirements set for by the licensing authority and the criminal court. Members operating under a restricted license are not authorized to drive or operate a District vehicle classified as a commercial vehicle under RCW 46.25.050.
- E. The Member may apply for an Employer Declaration for Ignition Interlock Exemption form, to allow the Member to drive when doing work for the District. The Member must comply with the State of Washington Department of Licensing or issuing state licensing authority requirements for suspension exemptions. The form is attached to this policy and can also be found at <https://www.dol.wa.gov/driver-licenses-and-permits/suspended-license/ignition-interlock-device-iid>.
- F. For a second arrest following a conviction for DUI / physical control of a vehicle under the influence within 5 years, retention as a Member is solely at the discretion of the District.

V. RELATED DOCUMENTS

P-519 Drivers License

P-520 Drug and Alcohol Misuse Prevention and Testing Program

Employer Declaration for Ignition Interlock Exemption (IID) Form attached to this policy.



Employer Declaration for Ignition Interlock Exemption

Use this form if you must have an ignition interlock device (IID) installed in all vehicles you drive AND your employer requires you to drive a vehicle without an IID.

Eligibility

- To get an employer exemption, you must have an IID installed in your personal vehicle.
- You may only drive the company vehicle during working hours.
- Employer vehicles assigned exclusively to you, used solely for commuting to and from employment, are not eligible for an exemption.

Exemption

If you have an IID installed in your personal vehicle and your employer requires you to drive a vehicle without an IID during working hours that is owned, leased, rented, or the temporary responsibility of your employer, you must:

- Complete the employee section of this form
- Have your employer complete and sign the employer section
- Carry a copy of this form when driving for your employer
- Send this completed form to:

Mail: Application and Issuance
Department of Licensing
PO Box 9030
Olympia, WA 98507

Email: interlock@dol.wa.gov

Fax: 360.570.7824

This form is only valid for one year from the date of signature. You must renew it every year you are required to have an IID installation.

Employee

PRINT OR TYPE Name of employee (<i>Last, First, Middle initial</i>)		
Washington driver license number	Date of birth	10-digit daytime phone number

Employer

Name of employer contact or representative	10-digit company phone number	
Company name	UBI number	
Company street address		
City	State	ZIP code

This employee is required to operate a vehicle during working hours that is owned, leased, rented, or in the temporary care of this company.

I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.

X

Date and place (city or county) signed

Employer signature