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MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

State Advisory Council on Emergency Medical Services

**MEETING SUMMARY
CONFIDENTIAL PEER REVIEW
MEETING DATE: November 22, 2016**

A meeting of the State Advisory Council on Emergency Medical Services was held on November 22, 2016 at 12:30 pm in Room 490-492 Truman Building; Jefferson City MO with Dr. Lynthia Andrews presiding. A quorum was present.

BOARD MEMBERS: Mark Alexander, Dr. Lynthia Andrews, Ben Chlapek, Joan Eberhardt, Dave Herman, Eric Latimer, Ruby Mehrer, Wally Patrick, Helen Sandkuhl, Sam Schneider, Dr. David K. Tan.

BOARD MEMBERS PRESENT: Mark Alexander, Dr. Lynthia Andrews, Ruby Mehrer, Helen Sandkuhl,
Board Members by Phone: Joan Eberhardt, Ben Chlapek, Wally Patrick

ABSENT: Dave Herman, Eric Latimer, Sam Schneider, Dr. David Tan

GUESTS: Lori Beck SLCH, Patricia Casey, Cardinal Glennon, Angie Cunningham, Children’s Mercy KC; Richard Dandridge, Children’s Hospital SL; Chuck Doss, Boone Co Fire; Joshua Dugal, Cardinal Glennon; Noreen Felich, Research Medical Center; Lori Freeman, Dr. Dee Hodge, SLCH/Wash U; Art Maxwell, NTA Ambulance; Rande McCrary, MEMSA and National EMS Memorial; Dr. Doug Schuerer, Wash U; David Seastrom, Children’s Mercy KC; Anne Toenjes, SSM Cardinal Glennon; Charlie Vielhauer, LifeNet Jason White, MARC

DHSS Staff: Terry Ellsworth, BEMS; Les Jobe, BEMS Chief; William Koebel, DHSS Health Standards and Licensure;

By Phone: Dr. Brian Froelke, Wash U and E. Central Medical Director; Bob Patterson, Mercy Springfield; Luke Walker, Mercy Springfield

Introductions were completed. Meeting to order at 1238

| Topic | Discussion/Conclusion | Recommendation/Actions | Follow-up |
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| I. Review of Minutes | | | |
| A. Approval of Minutes | <i>Mark Alexander moved to approve the October 25, 2016 minutes as written. Seconded by Helen Sandkuhl. Motion carried.</i> | | Dr. Andrews will sign the approved minutes will be posted to the BEMS website. |

| II. Subcommittee Reports | | |
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| <p>A. Pediatrics Subcommittee Noreen Felich, Chair</p> | <ul style="list-style-type: none"> • The subcommittee met before SAC today. Goal setting trends and disaster response were discussed. The bus crash in Tennessee will be discussed in detail at a future meeting. • The Illinois document on pediatric pain management will be reviewed. • Work continues on a pediatric assessment form. • The committee will be looking at trauma regulations regarding pediatrics. | |
| <p>B. Trauma Subcommittee Dr. Doug Shearer, Chair</p> | <ul style="list-style-type: none"> • Dr. Shearer reported the committee is trying to get the trauma meetings up and going again. Primarily the goal is to look at trauma regulation and see if revisions are necessary. Data collection and organization of data output is needed. • Helen Sandkuh said Stroke and STEMI regs were approved long ago but trauma regs have been held up. She asked the DHSS representative to respond. Les Jobe said the trauma regs are with BEMS legal counsel. Existing trauma regs give med directors latitude. • Dr. Shearer said new regs have Level IV trauma centers defined but current regs do not. Pediatric trauma regs are also in new ones regs. Dr. Shearer indicated the delay is with triage and transport section. | |
| <p>C. Legislative Subcommittee Mark Alexander, Chair</p> | <p>Mark Alexander reported discussion on 19 CSR 30-40.375, Uniform Data Collection System and Ambulance Reporting Regulations split into 3 parts:</p> <ol style="list-style-type: none"> 1. Data Collection by state needs to be in compliance with NAEMSE 3.0. Discussion continues on when data should be submitted to the state. Submitting it the 15th and 30th of each month is recommended. 2. Patient care reports to hospitals addressed in 1st sentence of Section 3. Reports should be received within one week. It is recognized there may be problems within certain groups like organ transport. If info is missing the hospital will have to call EMS as they do now. 3. Point of hand-off reports gives consistency. Australia and New Zealand have example. This may be handed off to the Regions to address. In some systems the documents reside at the hospital. EMS gives verbal report which is recorded by | <p>Mark Alexander will continue to update SAC on issues pertinent to EMS</p> |

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| <p>D. Education Subcommittee Chair</p> | <p>hospital personnel. Doug Randall accepted a job out of state. No replacement chair has been named at the point. No report.</p> | <p>Dr. Andrews will consider a new Chairperson for the Education Committee.</p> |
| <p>E. Air Ambulance Committee, Ruby Mehrer Chair</p> | <ul style="list-style-type: none"> Ruby Mehrer reported the Air Ambulance Subcommittee postponed today's meeting to next week because some key people were not able to attend. The meeting next week will be a conf call, probably Thursday Dec 1. | |
| <p>F. Emergency Management Wally Patrick, Chair</p> | <p>CALS equipment has been inventoried and Wally Patrick is storing the equipment.</p> | |
| <p>Educational Offering</p> | <p>Neal Zeid Power Point Presentation on UVC Disinfectant</p> | <p>Power point available Request from ruby@lifeflighteagle.org</p> |
| <p>Topic</p> | <p>Discussion/Conclusion</p> | <p>Recommendation/Actions</p> |
| <p>III. Regional Subcommittee Reports</p> | | |
| <p>A. Northwest</p> | <p>Art Maxwell said NW Region met last Wednesday. Discussed legislative including:</p> <ul style="list-style-type: none"> It has come to light that the LODD \$25000 benefit will be paid only to estates, not individuals. More info is needed on this. Interstate compact—there are pros and cons. People in the middle of the state are not as supportive of the concept as those who live near the borders of other states. TCD times—measuring different parts. Discussion included the importance of measuring how long it took from the event to tertiary care center intervention—not how long it took to get the patient to out the initial hospital's doors. The focus on the door to door time in the first hospital has led to using local ground EMS so they don't have to wait on a helicopter. Overall time and time out of hospital for these patients should be considered. DEA bill passed by voice vote in House. No meeting in Dec | |
| <p>B. Central</p> | <p>No report</p> | |
| <p>C. Southwest</p> | <p>Bob Patterson reported SW Region met at Cox on Oct 28.</p> <ul style="list-style-type: none"> Lots of dialogue on diversion. Some champions in the | |

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| | <p>region have engaged to reduce diversion times.</p> <ul style="list-style-type: none"> A focus in SW is unified stroke scale. May recommend it to be adopted statewide do boundaries of regions don't have different criteria. <p>No Report</p> <p>Rich Dandridge reported Dr. Shearer chaired the meeting Nov. 11th.</p> <ul style="list-style-type: none"> East Central is trying to get an iPad for conf calls. LA motor scale is preferred because AHA data is available even if state data is not. The Sept TCD conference had over 100 people attend. CEUs for TCD hours were provided. Due to a scheduling error, the conference was compensated by the hosting facility. The money will be used for the life saver expenses. Dr. Keeperman is trying to get a regional website to host the regional community plan. He visions a back end to be used for voting. The region as had a problem keeping resources straight. East Central has granted over \$10,000 for projects. SCCAD will do 30 and 60 second PSA on the importance of calling 9-1-1 for TCD patients. This meets the terms of the grant to benefit the region. Officer elections will be held in December. It is likely there will be one or two more spots available for appointment to the committee in the coming year. | |
| <p>D. Southeast</p> <p>E. East Central</p> | | |
| | <p>F. Region A</p> <p>Region A met November 7th at Liberty Hospital.</p> <ul style="list-style-type: none"> EMSC will hold a mini conference Feb 3 with sessions in the morning and then the same topics repeated in the afternoon. The Bonus Medicare payments to urban, rural and super rural EMS agencies are set to end in March 2017. Jason White is working on the issue. There was concern expressed some outlying hospitals were not willing to use helicopters for TCD patient transports because the out of door time might be delayed. Being overlooked is the patient's arrival at a tertiary facility may be delayed because ground transport was used. Education | |

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| <p>G. Regional EMS Medical Directors Dr. Brian Froelke</p> | <p>is needed to have those hospitals activate the helicopters early, not waiting until the patient is ready to roll out the door. Discussion included whether or not patient outcome was being affected.</p> <ul style="list-style-type: none"> • Class for Community Health Workers in progress. About 20 students including some paramedics so requirements for Community Paramedics education met. • Brief meeting held this morning. • It was recognized that new medical directors need orientation. • January meeting will be at 0930. | | |
| <p>IV. DHSS-BEMS Report</p> | | | |
| <p>BEMS Report Mr. Les Jobe</p> | <ul style="list-style-type: none"> • Mr. Jobe reported EMS regional medical directors will serve 4 years as outlined in 190.103. • Community paramedic regs will be published Nov 30 and effective Dec 30. • Still working on .375, data collection. • No Report | | |
| <p>Topic</p> | | <p>Recommendation/Actions</p> | <p>Follow-up</p> |
| <p>Center for Patient Safety Lee Varner</p> | | | |
| <p>New Business and Announcements</p> | | | |
| <p>Old Business</p> | None | | |
| <p>New Business</p> | None | | |
| <p>Next Meeting</p> | <p>Jan 24, 2017, Truman Building, Jefferson City at 12:30 pm Feb meeting will be in Boone Co Fire No meeting in Dec.</p> | <p>Agenda with meeting details will be sent prior to the next meeting.</p> | |
| <p>Adjourned</p> | <p>Meeting adjourned approximately 1:35 pm.</p> | | |

[Signature] _____
 Date Approved 3-28-17
 Lynthia Andrews DO, SAC Chair

Summary respectfully prepared by Ruby Mehrer

