

Lancaster County EMS Council Meeting July 21, 2011

The meeting was called to order at 1807, and the Pledge of Allegiance was recited.

The minutes from the May meeting were distributed with the meeting minutes. Hearing no questions, changes, or corrections, the minutes were approved.

Officer's Report

- Vito is not in attendance due to child care issues and coverage at Christiana Ambulance
- Vito is working at Christiana Ambulance and is excused
- The secretary's position is now vacant, as stated verbally to Ron Baier
 - Diana went to an EMS organization in Lancaster County
 - Ron Baier will review the bylaws, as this may require an appointment
- Lori Shenk and Ron Baier are working on the constitution and bylaws
 - Ron asked to table this until he can review it
 - It will be addressed at the September meeting
- Ron attended a meeting at the Federation on July 13th regarding EMSOP funding
 - EMSOP is a funding stream source and is very important to EMS organizations
 - It has traditionally been used to purchase a variety of equipment and some additional services occasionally
- The 2010/2011 priority fund was distributed in draft format – ranked the previous year's top 11 initiatives.
 - Ron will share the new funding initiatives when he receives them
 - The 2011/2012 initiatives will be very similar to the 2010/2011
 - The priorities in 2011 are as follows:
 1. Equipment required in BLS and ALS ambulance service licensure
 2. Recruiting and retention programs, including scholarships, tuition reimbursement for first responders, emergency technicians, and paramedic training in areas with high pre-hospital personnel vacancy rates as determined by the Regional EMS Council and approved by the Department of Health
 3. EMS personal protective respiratory equipment approved by the Dept. to protect EMS practitioners from communicable diseases transmitted from person to person through airborne mechanisms
 4. Quality Assurance and Performance Improvement programs
 5. Software and computer equipment used to collect and transmit EMS patient care reports electronically
 6. Develop or improve an organizational Risk Management Program, including safety measures, hazardous and mitigation, and the necessary organizational structure and support processes to an ambulance service
 7. equipment, especially wave form and tidal CO₂

8. Additional cost of reflective chevron markings on the back of ambulances purchased as an ambulance service
 9. For an ambulance service older than 10 years or has more than 200,000 miles; limit one per fiscal year
 10. Costs associated with potential mergers and consolidation or services, including (but not limited to) consulting fees, studies, legal fees, and statistical analysis
 11. Cost associated with an actual merge and consolidation of services
- These proposals for funding must be comprehensive and include the _____ and approved by the Department, which is required for prior funding
 - The top 5 are significant; #3 and #6 were discussed in relationship to respiratory protection - one piece of the overall Risk Management process
 - Each Council President was given a form and asked to priority 1-11; equipment was high on everybody's list

Regional Commendations Process

- If an EMS service puts in for a Medal of Valor or Life Saved, etc., applications can go to the Federation, but are sent to the County Council President
- A few applications are being reviewed now
- Ron asked for volunteers to step up from the Council to review them
- York, Cumberland and Franklin are doing it this way
- The Life Saved ribbons are very important and are specific to EMS
- You have to recuse yourself if you are reviewing an application from your service
- This process can be done electronically and doesn't require meetings
- The requests would be forwarded to the group; the group would send it back with their recommendation, and it would come up at the next Council meeting
- We can determine when the medals are distributed – can be annually or quarterly
- Fire Departments could be given a certificate if they are involved
- If a licensed QRS service, BLs service and non-transport ALS unit are involved, the only people who would be recognized with medals from the region would be the licensed QRS service and ALS provider
- If fire or police assist, the region could provide Heart Saver pins and a certificate
- All pertinent information would be shared with the group reviewing the applications
- Any questions would be sent to the other 7 EMS Council Presidents and would be reviewed together; Ron would get to see requests from other counties as well
- Ron is looking for 6 people to participate

Ambulance Inspections

- Inspections were done on April 28th – this is not punitive – it's to insure that proper certifications are on the ambulances
- New York, Delaware, new Jersey and Maryland routinely do state inspections
- Most were fine, but 10 ambulances were pulled out of service because they didn't meet licensure inspection
- Certain certifications are required to be with you when you are on an ambulance
- Suction units were checked to insure they were functioning properly; several didn't

- Inspections will probably occur quarterly
- They will happen after you have dropped off a patient at a facility, not while transporting a patient
- Before 2005, the state pulled an average of 10 certifications a year; in 2010 they pulled almost 60 – this is a national trend

Vice President’s Report

Treasurer’s Report from May, 2011

Checking balance	\$1,421.89
Money Market	7,775.45
Interest Earned	<u>1.60</u>
Balance	\$7,780.35

Savings Account	\$ 110.65
Interest Earned	<u>.01</u>
Balance	\$ 110.66

Total balance for the Lancaster County EMS Council: \$9,130.90

- \$1,021.00 was paid to BFIS Insurance – money will be moved from savings to checking
- The insurance policy for this year is in good shape
- There was a problem because BFIS sent the policy and the notice for amount due to the wrong address – Lancaster County Solid Waste Management
 - BFIS called, threatening to cancel the insurance after May if it wasn’t paid
 - We asked for a 10-day extension and asked for a new statement to be issued
 - It was paid last week, and we are fine
- We pay over \$1,000/year for liability insurance to make \$1,600/year at Long’s Park
 - Will look into getting other quotes and what type of insurance we actually need
 - Insurance reps are invited to the September meeting to discuss policy renewal.

Liaison Reports

Dr. Reihart – (inaudible)

- (inaudible) This will be the first certification process to become certified as a tactical paramedic or tactical physician – ALS provider or higher
- It will be held the last week of March, 2012 (hopefully here)
- If anyone is interested, contact Dr. Reihart or Steve Lyle
- We have a working group for specialists across the state
- There is a former Medical Director of Delta Force and the Medical Director for Philadelphia SWAT

CARES Project

- Cardiac registry, which is a research project – working on hypothermic resuscitation
- PA is one of 5 states selected within the United States
- There is a problem in EMS collecting outcomes data for medical patients, especially

sudden cardiac arrest

- 100% compliance is needed
- Lancaster EMS and LGH are onboard – need to get Ephrata, Regional, and HOL
- It will show us how successful or unsuccessful we are at resuscitating cardiac arrest patients
- Sponsorship from the CDC – it is based out of the University of PA Center for Resuscitation
- It will probably go live at LGH within the next 1-2 months
- There are about 5 data points that LGH downloads; CARES has 13 data points and there are some optional data points which go right from the PCR into it
- It will initially be open to ALS, but we will discuss opening it up to BLS units also

BLS

- LGH is wrestling with the 2012 mandate for BLS medical direction; we are in discussion to be able to provide that service to BLS and QRS organizations
- If there is a desire to have medical direction for your BLS or QRS unit, you have to have one (AED Medical Director doesn't count) – you may need to clear it with the AED Medical Director because they may say no

Lucas Device

- LGH is trialing Lucas in the ICU – the cost is around \$14,000
- Between the ED and ICU, it will be trialed for 2 months
- A Code Blue simulation was taped recently
- Lancaster EMS has 6 of them, and they continue to see about 39% return of spontaneous circulation with their use
- Dr. Reihart has a strong desire to make this a BLS skill – he foresees this happening within a year; will keep the group posted on Lucas
- There has been discussion on whether or not EMS should transport cardiac arrest
 - Geisinger does not transport any cardiac arrest
 - Medicare will not pay

Lancaster County 911

Air Transport

- With SkyCare out of the picture, it has thrown aeromedical into a quandary
- There were talks with the Maryland State Police – they are moving Trooper 1 out of Baltimore County into Cecil County, MD over the weekends and have offered us the flights in the southern end of the county
- One of their sergeants is Keith McMann, who used to run in Lancaster County
- Billing, etc. was not discussed
- With Trooper 1 there, the lines have been redrawn
- Life Net 61 out of Christiana Hospital is back in the picture in the very southern end of the county, such as Wakefield
- StatMed Evac13 has picked up a few more townships in the western part of the county
- LifeLion has brought in their footprint, but Penn Star 4 and Penn Star 2 out of West Chester have really brought in their footprint

Radio System

- The vendor proposals were due on July 7th – we got them in on time
- We have 90 days to review and get questions back to them
- 400Mhz band, upper 400 T band, P25 system
- There is a lot of information to review
- A decision should be made in the fall, with a contract signing before the end of 2011
- Towers are up already
- We are going from a County Class 3 to County Class 2A – there is some loss of 911 funding with that
- We have to reduce our funding stream – it was stated that there was a \$900,000 loss for LCWC, but starting July 1st there was a funding stream from TracFone
 - There will be a loss, but not as much as projected
 - The county will have to pick up more funding out of the tax base than is received from phone money
- There were rumors as to what a Class 2A county is vs. a Class 3 – what does the county have to provide?
 - Do you need to have your own EHSF per county?
 - Do you need your own Fire Marshall's Division?

Operations

- We assisted White Horse EMS and Gordonville EMS at “Horse Progress Days”
 - Large 2-day Amish-type event held annually in several states, including Michigan and Illinois – it comes to PA every 7 years
 - There are 10,000 people a day and it went very well
 - There were some injuries, a lot of heat exhaustion
 - New Holland was involved as a backup; Medic 6 came up as an ALS presence

Webcad

- Nothing new to report
- Signing on of staff onto rigs is good so everyone knows who's riding
- More personal for the dispatcher - if they need to talk to somebody, they know their first name
- It will help with QA
- If there is a problem in dispatch, the director of that agency can be called and it is known who the guys are if there's a problem – so far, it's been more positive
- We won a prestigious national award from “ESRE” –Diego, CA - the largest mapping vendor in the world
 - Tens of thousands participated and 150 people in the world received an award
 - We won for the common operating platform we are using with Webcad and the fact that we can get to it and see where the calls are and get the information

EHSF Report Tourniquets

- There are two black rubber band around the tourniquet when being stored
- The Federation doesn't require any training on this product – but it was recommended

that the providers be trained

- Dr. Reihart approved it for use
- An e-mail was sent to all service managers with a link to the product vendor's website, which has a video
- There is a windlass – U-shape, and as soon as it's turned, there is a triangle piece that the winless pops onto it and it's secured onto the extremity
- It can be reused many times; however, you won't reuse it if it's truly used for a patient
- It won't be removed until the OR; once a pre-hospital provider applies it, they aren't supposed to remove it
- When is it used? Follow the PA State protocol for proper time to apply a tourniquet

Spot Inspections

- Started in April – currently quarterly, may go bi-monthly
- It's to insure that services are doing the right thing
- You won't be pulled over at the side of the road – most likely will be done at a hospital or receiving facility, such as a dialysis center, in order to catch routine transport companies, as well as Emergency Service companies
- It will not be a full inspection, but look for key items
- The goal is to ask simple questions about the system to see where we can start doing process improvement

Protocol Booklet Update

- Booklets are on order and should be in anytime
- We have asked for a waiver from the Dept. of health for the tourniquet – we were given 45 days past July 1st to get those out because it was a vendor issue Protocol booklets were the same
- If you don't want to put them in your ambulance because of printing multiple pages, you have a 45-day grace period until you get the booklet
- Many services expressed a desire for a full-page copy in a binder – hopefully they will be handed out in the near future
- There was also discussion on electronic availability; download the most recent pdf for the July 1st protocols – that's also allowable and would meet the criteria of having the protocols in your ambulance

State EMS Conference

- Will be held in August at the Marriott in Lancaster
- If interested, contact Steve _____
- The first ever Pediatric Care Symposium will coincide with this conference
- Instead of a pre-conference, it will be a full day of pediatric continuing education
- Information on the August conference, as well as the one coming up in Johnstown, can be found on the PESH website

EMSOP Funding

- Packets will be mailed out the week of July 25th
- There will be information about filling out a survey on our website, which will be up soon – instrumental in EMSOP funding

- Basic questions are asked about your service
- They will match surveys up with the EMSOP funding process this year, so completion of the survey is important
- If there are any questions or problems, call the office

Licensure Change

- As of July 1st, protocols are required (state-wide copies of protocols)
- Tourniquets are required
- Oral airways – you still need 6, but now certain sizes are required
- Pediatric size oral airways; one size 0-1; one size between sizes 2-3; one needs to be between sizes 4-5
- Need 5 nasal airways– one must be between sizes 16-24 and one between sizes 26-34
- With the _____ mat, they want to see a neonatal mat - previously it was only pediatric and infant

Rules & Regulations

- Town Hall meetings are coming – please attend if possible
- It's the time to have a say and truly make a difference

HACC Classes (Mike)

- Classes are winding down – fall classes are here and in Gordonville
- Site will probably change in the spring, but we will still have them here
- In the spring, classes will probably be run at the HAAC campus, may lead to no longer doing them in Gordonville
- Don Kilheffer contacted Mike about doing an EMT refresher in Reinholds – we are working with him
- It will happen without much notice, so information will be sent out as soon as it's received
- Summer classes may no longer be possible due to time constraints
- A summer EMT class may not be offered next year

South Central Task Force

- The next round of monies received will be fiscal 2013 monies, and there is a 30% reduction in funding across the board
- We haven't created a budget yet for 2013, but are OK for 2012
- There are three priorities needed to meet with the budget reduction: Exercises, training, and equipment – ancillary items beyond that will be hard to do
- Ron stated that if a certain number of exercises aren't done regionally and we do a comprehensive review, we run the risk of losing additional federal funding – training and exercises will be the bulk, and whatever's left will be for equipment, but it will be scant

Constitution and Bylaws – Lori

Steering Committee Report

- The Steering Committee was formed a few months ago to help define the purpose and

future of the Council

- The Committee was a chance to develop a purpose and mission statement, which was presented at the last Council Meeting (a copy will be submitted with the minutes)
- We attempted to develop objectives – may not have conclusively come to an agreement
- Objectives may not be specific, memorable, and time oriented – maybe a little vague (more discussion is needed)
- The Council has to vote to accept it and it becomes a bylaw change
- The Council needs a Bylaws Committee – the quicker the better
- Ron was given a letter by Les - he will take the body of that letter and create simple, straightforward questions and add a small comments section
- We are now registered as an organization with Survey Monkey
 - Each organization is given a user name and password – it will go to each specific service via e-mail
 - The answers will be compiled and can be brought back to the Committee
 - It's better to put comments on the survey than ask for them in a letter, as very few comments come back that way
- Lori commented that we want to specifically ask what the Council should be doing - what do you expect it to do?

Constitution & Bylaws/Steering Committee

- Disaster Planning – nothing to report
- Education training – other than the PESH conference coming up, Ron had nothing
- First Aid Station in Long's Park – we are in dialogue with them again and it looks like we'll do it this year
- Last year, we charged \$1,600, and we'll do the same this year
- An update will be sent out via e-mail in a few weeks

Membership and Fundraising

- Long's Park
- No planning report

Pre-Hospital Systems Committee

- Ron is still working on developing it, getting someone to chair it
- It's a good way to share information
- Since Diana is no longer representing Providence, with the nominating component, Ron will review the current bylaws and it will be discussed at the September meeting

Old Business

None

New Business

- Ron received a letter from Mastersonville QRS and put Matt Shank on as a representative – Matt was introduced
- All the QRS units will need to be licensed – we should invite all of them to join, as

they are actively providing patient care

- Lori asked if there was going to be a POLST meeting
 - Ron said it was tabled in the sense that the Dept. of Health said they were going to come out with a POLST training that would be used state-wide to mirror the current changes in protocol – to date it has not occurred
 - There is nothing in LMS regarding POLST, but there was supposed to be
 - Ron will take the distribution list from the Council and e-mail it to everyone the week of July 25th

Hearing no further business, the meeting was adjourned