

Calhoun County Medical Control Authority
October 20, 2014

Kellogg Community College, EMS Conference Room
Battle Creek, MI

9:00 – 11:00 a.m.

- I. Call to Order** – The meeting was called to order by Kristin Sims at 9:01 a.m.

Board Members Present

Name	Represents	Position	Meeting Date: 10-20-2014			Attendance History
			Present	Excused	Absent	
Chet Dalski	KCC	Sec/Treasurer	X			13/13
Mark Burke	Marshall FFA	At-Large Exe.	X			13/13
Jeff Troyer	911 Dispatch	Board Member	X			7/9
Dirk Borton	Albion Comm. Amb	Board Member		X		10/13
Steve Frisbie	LifeCare Amb.	Board Member	X			13/13
Dorothy Malcolm	BBC ER Director	Vice Chair	X			8/9
James Stevens	At Large	At Large Bd Member	X			13/13
Greg MComb	Urban MFR	Board Member	X			4/4
Dan Stewart	CCMCA	Medical Director		X		3/4
Susan Watson	BBC Administration	Board Member		X		5/6
Kim Campbell	Oaklawn Hospital	Board Member	X			4/5
Kristin Sims	Oaklawn Admin	Chairperson	X			13/13
James Thompson	Rural MFR	Board Member	X			3/4

Others Present-

Holly Williams-Kalamazoo Emergency Associates

Introductions

Additions or Deletions to the Agenda-Add to Old Business: Update on VA Medical Center; Add to New Business-New Protocols, Regional Diversion Policy and HB 5404, Public Act 312 of 2014

Approval of Minutes-The minutes of the July 21, 2014 meeting were approved. (Stevens/Burke)

II. **Public Forum:** None.

III. **Committee/Officer Reports:**

A. **Medical Director Report/PSRO Committee (Dan Stewart)**—Dr. Stewart reported that the PSRO Committee had been unable to meet as group but has been sharing information. Dr. Stewart was able to review the run sheets and found no problems. He also shared that he has begun a conversation about internal Protocol Deviations at some agencies but has been resolved and there will be a follow up discussion with more to follow during the new business discussion

B. **Finance Committee (Chet)** – Chet shared the financial report. He has received the next to last payment from LifeCare. \$2268.65 remain due and all loans will be clear. Chet reported the assets as of June 2014 and reminded the group that KCC runs a fiscal year not a calendar year and Chet indicated that there have been several payments out since June that include paying the Medical Control Director and some grants. He also shared that while we are ahead in our investment strategy with Hilliard Lyons, there was a net loss in the previous quarter. He also presented the financial report for review. Motion to accept Financial Report. Motion carries. (Stewart/Stevens)

IV. **Old Business:**

A. **Epi Pens**-Chet shared that there were actually only three departments that want to carry the Epi-Pens and the process developed for Fire Departments to get the Epi-Pen training and the pens issued-Paul French (an EMS KCC adjunct faculty member) will do the trainings and drop off the pens at the same time. The cost for the pens themselves was about 1500.00 through BBC and we have the pens but have not seen a bill yet. Chet also reported the addition of other resources for the Epi-Pen and the fact that the new resources are not covered under the State of Michigan Protocols without doing a comprehensive study. Chet expects the Epi-Pens to be in the Departments by December 1, 2014.

B. **Protocols**- We assume that our Protocols have been approved by the State although we still have no further info from the State.

C. **Glucometers at BCFD**-Chet has done the follow up requested by the Chief on whether or not MFR's may carry glucometers. The use of glucometers is outside their scope of practice so in order for the MFR's to carry the glucometers there would need to be a comprehensive study with medical evidence of the need. Discussion followed about

who would do the study, where to get participants', what data should be included, the length of the study for baseline info and then the actual study itself; and the actual value of the MFR's using the glucometers. It was referred back to the Chief for his decision on whether or not he wants to lead this study.

- D. VA Fire Department-** The VA now has 2 vehicles licensed and in service and is responding to calls appropriately.

V. New Business-

- A. State of Michigan Non-Compliance Letters for MFR Agencies-**Chet shared the issuance of letters to MFR Agencies regarding record keeping required by the state. There are several agencies in our county who are not in compliance with the new software and their reporting practices;
- a. **Leroy**-has purchased the software
 - b. **Newton**-no response
 - c. **Emmett**-using the free software from the state
 - d. **Tekonsha**-compliant as of September
 - e. **Marengo**-no response
 - f. **Marshall FD**-now reporting

Chet reminded the group that this is actually a Federal mandate. Continuing non-compliance could potentially result in the loss of funding and/or grant dollars because the information is linked to those requests. Further, a failure to comply will eventually result in the loss of the ability to renew the agency license. Discussion followed as to the value of the information, the duplication of information reported by multiple agencies, whether or not the information is correct. The group voiced some frustration with the submission of the information.

Mr. Frisbie made a motion to hold our agencies compliant by 1-1-15 or the CCMCA would take action. The motion was withdrawn after a discussion about the fact that the State will take more effective action than we can. No action was taken as this was an information only presentation.

- B. Medical Control Seminar-** Chet attended the Seminar 9/28 and 9/29. He shared that there is a Michigan Community Paramedic Special Study. It started in 2009. The goals of this study include reducing unnecessary EMS transports, reduce ED visits and reduce repeat admissions. They are looking to gather data to develop the future Community Paramedic Programs and still stay within the current scope of practice. In addition, the state has approved 2 organizations to participate in the study and is looking for proposals from an MCA to participate in the trial program for Community Paramedic Program. There is no reimbursement at this time for any pieces or parts of participation. LifeCare is looking to get involved. Life, HVA and MedStar are in the program.
- Data Collection-Med Support Agencies are supposed to be submitting data and there are over 800 not submitting data; these are primarily MFR agencies. The state has received both written and verbal complaints and requests to change the requirements but remember it is a federal mandate. There was quite a bit of discussion about the data collection and the consequences of challenging the

required process. The state, at this time, is looking for a good faith effort at compliance. If no action is taken to rectify the situation, the agency will lose their license.

Declarative Ruling-States that as of 6-09 no permission is required from the local MCA to operate in any area. The argument for this was that it showed a restraint of trade. The only requirement is the organizations be able to show availability 24-7. Regional Medical Control Authorities-Chet shared the vision from the Governor's Office of Regional Medical Control Authorities. The plan is to disband individual county MCA in favor of merging within the Prosperity Regions. They MCA will be reformed into 8 MCA for the near future. Calhoun County would be assigned to Region 5. There are some fund dollars set aside to manage the transition-1 million dollars, however there are no funds to sustain the new regional organizations. This move is mainly being driven by the Governor and the trauma hospitals.

There was a study in 2002 regarding the use of red lights and sirens being used too often and sometimes in error and the impact on care.

There was follow up discussion on geographical area and governance as it relates to the new MCA mergers.

- C. Dispatch Protocol/Complaints-**Chet reported a conversation that happened in response to a complaint/query into one of our protocols. He reviewed the "card" process and how dispatch get to the priority status on any one call. Dr. Stewart and Chet called a meeting of the dispatch department and the agencies involved. Two separate calls prompted the meeting but they had the common denominator of a victim using blood thinners. Minutes from the meeting were distributed for review. Jeff Troyer shared data gathered where blood thinners would significantly affect the priority status. The categories follow but it is important to note that this will affect a number of calls. The totals for the past three years for all categories was 1792 calls.
- a. **Animal Bites-#3**
 - b. **Assault/Sexual Assault-#4**
 - c. **Falls-#17**
 - d. **Hemorrhage-#21**
 - e. **Traumatic Injury-#30**

There was extensive discussion about changing the priorities, staged events. The above types of calls were unanimously recommended for a change from Priority 3 to Priority 1 based on the review and information available. Motion to support all changes recommended by the committee. Motion carries. (Frisbie/Dalski)

- D. Protocol Change-**Chet reported that we recently received a letter from the State regarding new protocols and updated protocols coming from the Medical Control Conference-
- **Delirium**
 - **Crush Syndrome**
 - **High Risk Delivery (optional)**
 - **OB Emergencies**
 - **Emergency Dosing**
 - **Pediatric Emergency Dosing**
 - **Refusal of Care (updated)**

- **Spinal Precaution and Injury**

Chet briefly reviewed some the changes and each of the above categories is either an updated protocol or a new protocol, and in some cases we have no choice and must adopt the protocol. The protocols will be referred to PSRO for review and brought back with more information and recommendations.

- E. Regional Diversion Policy**-Dr. Stewart shared a recent situation that found both Oaklawn and BBC at capacity and began a discussion about the who, what, where when of a diversion situation. How long the diversion lasts? Etc. The discussion also questioned communication between dispatch, the hospitals and the EMS providers. The recommendation is to put together a committee to look at the idea of diversion and how we as Calhoun County want to deal with it. Committee member volunteers include Dorothy Malcolm at BBC, Kim Campbell at Oaklawn. More to follow.
- F. HB 5404-PA 312** –Chief McComb reported from the Fire Chiefs Conference that the State presented an announcement in the change of state protocols regarding the use of Narcan by MFR agencies. The protocol is effective immediately and all agencies must participate and be trained but all will have an opportunity to opt out after the three window. The MCA’s have 12 months to provide the training needed and then all agencies will need to be in compliance.
- G. Miscellaneous**-Chief Jim Thompson announced that this is his last meeting for the CCMCA. He has been disappointed in the Fire Chiefs meetings and chooses to withdraw his attendance at those meetings so sees no need to attend the CCMCA meetings. He expressed that he has felt like he got some good info and enjoyed the CCMCA meetings but is done.
- H. Ebola Discussion**-Jeff Troyer began the discussion with a question from dispatch on whether or not there will be a specific list of questions for dispatch to ask. Steve Frisbie continued it with info from the County Health Dept meetings that are happening every Friday at 2 pm at the Health Dept. All are welcome to attend. Info from Steve included some recommendations from the committee to quarantine the patient, isolate the family and not to allow visitors. Patients may be taken care of where they are instead of sending them to the hospitals. The group is working on developing a protocol for handling an Ebola case. The 51st Civil Defense Team is looking at our protocol and so far supports it. Steve voiced an interest from Fire, Ambulance and the hospitals for PPE training.

VI. Adjournment

Motion to adjourn at 10:39 am. (