

REGIONAL COMMUNICATIONS COMMITTEE

 Meeting Report

05 September 2014

 1000 Hours

 EHSF Conference Room

## ATTENDANCE

**Present:** Ann Weller Chair- Lancaster County PSAP

John Eline Adams County PSAP

Ben Parr Adams County PSAP

Keri Zeigler Dauphin County PSAP

Bart Shellenhamer Dauphin County PSAP

Timothy Baldwin Lancaster County PSAP

Eric Fahler Lebanon County PSAP

Bryan Stevenson Franklin County PSAP

 Doug Glass Cumberland County PSAP

 Tom Bell Perry County PSAP

 Cindy Dietz York County PSAP

 Amy Smith York County PSAP

**Staff:** Ernest S. Powell Director of System Operations

 Megan A. Hollinger Project Manager

 Michael J. Guerra Resource Coordinator

 Celia M. Fraticelli System Coordinator

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## CALL TO ORDER

Ms. Weller called the Regional Communications Committee meeting to order at 1000 hours.

**OLD BUSINESS**

*EMD*

Ms. Weller inquired as to a need for an EMD course. There was an interest and a desire to host an EMD course in late October 2014.

*Action Item: Schedule EMD course in late October 2014.*

Mr. Stevenson offered an EMD course is being hosted in Frederick, Maryland on 29 September 2014. Mr. Fahler inquired as to a need for an EMD-Q course; there was little to no interest.

*ePCR Update*

EHSF is working with ESO Solutions though each EMS agencies implementation, training, and live reporting.  EMS agencies began live reporting starting on September 1st and will continue until the end of the calendar year.  By January 1, 2015, every EMS agency will be live.  After the new year, EHSF will begin working the next phases of the regional ePCR deployment, which involves features such as CAD, HDE, and training institute module.

For the RCC specifically, EHSF will work with ESO Solutions to renegotiate the cost for the CAD interface.  However, the EMS agencies desiring this feature will be responsible for the cost.  Some EMS agencies are beginning to eagerly contact their county emergency dispatch center to begin CAD interface.  EHSF is not prohibiting individual counties to begin evaluating the options for their respective area.  However, EHSF will be better capable after the new year to provide further details and assistance with this process.

*Mobile Integrated Health (MICH) / Community Paramedicine (CP) Update*

EHSF passionately continues promoting community paramedicine/mobile integrated healthcare (CP/MIH).  The concept of CP/MIH is to provide care and resources to patients/community members in need to reduce the reactionary response of unnecessary EMS resources.  The future goal is to reduce the number of emergency dispatches, especially for non-emergency needs such as public service calls.  EHSF will provide additional details as more programs are operating within the region.

NEW BUSINESS

*EMS Resource Utilization*

Mr. Powell advised there appears to be in increasing use of EMS resources for non-EMS patients in the system. A couple of examples were given and acknowledgment that the issues are not singular. Mr. Powell advised a workgroup will be created, which should comprise of at least PSAP’s, EMS Managers, and other stakeholders. While several questions were raised, it was globally acknowledged that the system is burdened, and changes should not occur in a vacuum.

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*Infectious Response*

Ms. Fraticelli provided a brief presentation on Ebola. Ebola is a viral hemorrhagic disease that has affected over 3,000 people in West Africa with approximately 1,500 reported deaths. There is no cure for Ebola and it can have a 50-90% fatality rate. Symptoms include fever, headache, malaise, diarrhea and abnormal bleeding. Symptoms can occur 2-12 days after exposure, though 8-10 is more common. You can only get Ebola from direct contact with infected blood/body fluid. Ebola can only be transmitted when the person has symptoms. The three most important factors are to Find, Contain and Treat the Ebola. Once a person is suspected of having Ebola, they must be isolated from other people. The proper use of PPE is paramount, and the treatment includes keeping oxygen levels stable, hydration and treating symptoms. There are lab tests that can identify Ebola, and currently the National Institute of Health is conducting Phase 1 Clinical Vaccine trials for the current strain (Zaire) affecting West Africa. The CDC has stated that at this time Ebola is not being contained as in past outbreaks and could reach 20,000 people before full containment can be reached.

Mr. Powell highlighted the MAC discussion offering there will be a workgroup created to further discuss the movement & isolation/transportation/destination and other logistics in caring for these types of patients.

*EHSF Publication*

Ms. Weller advised the EHSF has a Facebook page and a newsletter. Mr. Powell advised a request is being made to the vendor to add a spot for dispatchers/call-takers and that all could sign up to receive the newsletter at: <http://mad.ly/signups/47125/join> .

GENERAL DISCUSSION

*Legislation*

Mr. Baldwin stated there has been little movement in the 911 re-write. Members should be aware of the introduction of SB444, which is another Bill to allow media access to 911 information. Again members are encouraged to read the Bill. HB2377 was introduced, which would help out-of-state utility companies during a Disaster Declaration.

*Radio Communication*

Mr. Baldwin commented on a recent communication regarding what information can be given from the PSAP to the EMS Unit. It was acknowledged this has been discussed in the past, and a couple of articles were given referencing the question. It is acknowledged that PSAP’Ss do not fall under the HIPAA rules. Mr. Baldwin also stated he requested Mr. Lyle to inquire with the EHSF legal counsel to establish a “standard” or starting point of what PSAP’s are permitted/ should give over the radio.

*Hospital Status / Divert Policy*

Mr. Powell advised the Hospital Status page was no longer available. A workgroup is being established to revise the EHSF Divert Policy. Additionally, the area hospitals will be tracking their divert status through Knowledge Center. Mr. Powell advised the workgroup will discuss the notification of “Divert Status”.

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NEXT MEETING DATE

The next Regional Communication Committee meeting is scheduled for 07 November 2014.

ADJOURNMENT

Ms. Weller adjourned the meeting at 1145 hours.

Respectfully submitted,

Ernest S. Powell

Director of System Operations