



MEDICAL ADVISORY COMMITTEE

05 February 2015
0930 hours
EHSF Conference Room

ATTENDANCE

Present:	Michael Reihart, DO R. Daniel Bledsoe, MD Christine Dang, MD Donna Fehrenbach, DO Jeffery Lubin, MD Steven Meador, MD Tiffani Ream, DO Steven Schirk, MD Thomas Westenberger, DO	Regional Medical Director, Chair Pinnacle Health Lancaster Regional Medical Center Harrisburg Area Community College Hershey Medical Center Hershey Medical Center Memorial Hospital WellSpan Health – York Hospital York Regional EMS
EMS/Hospital:	Janet Bradley Bradley DeLancey Shannon Fouts Kim Kaiser Suzette Kreider John Logan Mark Moody Robert Patterson Holly Pinamonti Steven Poffenberger Newt Shirker Bryan Wheeler	First Aid Safety Patrol Susquehanna Township EMS White Rose Ambulance Hanover Hospital ALS North West EMS Community Life Team Memorial Hospital ALS Lancaster EMS Memorial Hospital ALS West Shore EMS Warwick EMS Hanover Hospital ALS
Staff:	Megan A. Hollinger Celia M. Fraticelli Matthew S. Sterndale	Director of System Operations System Coordinator – Clinical System Coordinator – Operations

CALL TO ORDER

Dr. Reihart called the Medical Advisory Committee meeting to order at 0936 hours.

OLD BUSINESS

ePCR Update

Ms. Hollinger discussed the live ESO training sessions previously held across the region answered many questions to clarify some misconceptions. To date, forty-one EMS agencies are currently live with ESO electronic patient care report (ePCR) solution.

Ms. Hollinger discussed partnerships with the hospitals will ease the transition, and allow the program to be used to its fullest potential. Some suggestions include a Wi-Fi printer in each emergency department to permit providers to print their summary report, or transfer of care form at the time of transfer of patient care. There is also a need to determine where each facility wants the draft or final version of the ePCR to be faxed or e-mailed.

CP/MIH

Ms. Hollinger announced two upcoming events: The 2nd Annual Penn State Public Health Day Symposium discussing the Affordable Care Act on 29 April 2015, and the 2015 Community Health Worker Summit on 05 May 2015.

Hospital Status/Divert

Ms. Hollinger prompted suggestions on the necessity for a hospital divert policy. The committee collectively agreed a divert policy and notification system is necessary, as not every hospital has access to Web EOC. A workgroup of members previously expressing interest will be contacted to reconvene a meeting.

Infectious Disease Response: Ebola

Ms. Hollinger reported activity has decreased relating to Ebola. The four taskforces continue to work on various initiatives regarding education and appropriate personal protective equipment.

NEW BUSINESS

Infectious Disease Response: Measles

Dr. Reihart provided the Measles fact sheet from the American College of Emergency Physicians (ACEP), and reiterated the need for heightened awareness. Ms. Hollinger will forward the link for members to join the Health Alert Network (HAN).

Naloxone

Ms. Hollinger advised EMS agencies may obtain Naloxone supplies and begin education. However, BLS providers are prohibited from administration until the protocols are published.

Non-licensed EMS agencies, such as law enforcement and fire, must have a partnership with a licensed EMS agency to obtain and administer Naloxone.

Mr. DeLancey distributed a QA/QI reporting form template. Susquehanna Township EMS developed this form to use with any law enforcement/fire departments they enter into agreements for Naloxone administration. Although the Department of Health Bureau of EMS (DOH BEMS) does not have authority over non-licensed EMS agencies and will not require reporting, it was discussed the EMS agency should receive documentation when Naloxone is used by law enforcement and fire.

Dr. Meador expressed concern with non-licensed agencies properly storing and safeguarding a medication and/or improper administration. EHSF will provide the suggested storage and safeguarding guidelines in the partnership packet.

Action Item: The Regional Medical Advisory Committee collectively agrees to require non-licensed EMS agencies (law enforcement/fire) to complete additional requirements in order to enter into an agreement/partnership with a licensed EMS agency within the EHSF region. These additional requirements include carrying of airway management devices, as determined by the EMS agency medical director, airway management education/training, an automated external defibrillator (AED), approved personnel also certified in cardiopulmonary resuscitation (CPR), and forwarded documentation of use to the EMS agency. This information will be included in the Naloxone partnership packet for EMS agencies.

EMS Protocols

Ms. Hollinger reported the 2015 Statewide protocols are not yet published. However, the release is expected in the near future for the BLS, AEMT, ALS, and critical care protocols. Protocols will have an effective date of July 2015.

Members discussed concerns of the critical care service/role not being a state certified provider level.

Scope of Practice

Ms. Hollinger announced the latest version of the EMS scope of practice was 17 January 2015 and highlighted some concerns.

Action Item: The Regional Medical Advisory Committee collectively agrees a letter to the DOH BEMS is warranted to address concerns within the scope of practice. This letter will include the following recommendations regarding the scope of practice:

1. Reconsideration from prohibiting an ALS provider to transport a patient with a chest tube.
2. Permit ALS providers to transport patients on multi-modal ventilators beyond July 2015.
3. Reconsider prohibiting an ALS provider to access a sub-cutaneous indwelling catheter.

This letter will also provide recommendations to:

1. Eliminate linking CPR entered in the EMS Registry with re-registration to prevent unnecessary lapsing of providers.
2. Clarification when EMS physicians will receive a certification expiration date and the requirements and process to provide the appropriate continuing education credits.

GENERAL DISCUSSION

EMS Resource Utilization

Ms. Hollinger announced there is a workgroup meeting on 11 February 2015 at 1400 hours at the EHSF office to discuss solutions to decrease the burden of public service calls.

EMS Agency Medical Director Communications

Ms. Hollinger reported EHSF is working to increase communications with EMS agency medical directors. Mr. Guerra is collecting current e-mail addresses for each EMS agency medical director within our region to provide notification following licensure inspections.

Ms. Hollinger also provided EMS agency medical directors have two choices regarding access to their agency's ePCRs within ESO: access to view all ePCRs within their respective agency, or access to only see the ePCRs the EMS agency leadership assigns for their review.

CPR RsQ

Dr. Reihart announced there is a CPR assist device called the CPR RsQ to increase quality compressions when performing manual CPR. Dr. Reihart stated the State EMS Medical Director, Dr. Kupas, is supportive of these devices and permits use.

EMS Week Activities

Ms. Hollinger distributed a flyer with the scheduled EHSF activities for EMS Week 2015.

Act 153 – Criminal Background Checks and Child Abuse Clearances

Ms. Hollinger reported there is confusion pertaining to whether Act 153 is relevant for EMS agencies that are non-hospital affiliated. EHSF sent correspondence to the DOH BEMS for clarification on whether EMS providers need to have child abuse clearances.

Ms. Hollinger noted there is other legislation requiring EMS providers as mandatory reporters of suspected child abuse through the state's reporting system.

AHA Mission Lifeline

Alex Kuhns from AHA Mission Lifeline discussed the Lifeline recognition program for EMS to enhance ST segment elevation myocardial infarction (STEMI) care.

ADJOURNMENT

Dr. Reihart adjourned the meeting at 1150 hours.

The next Medical Advisory Committee meeting is scheduled for 07 May 2015 at 0930 hours.

Respectfully submitted,

Celia M. Fraticelli
System Coordinator