

Monroe-Livingston REMAC Meeting

January 23, 2017

Meeting Minutes

Agenda Review – Elizabeth Murray

- Additions to the agenda
 - No changes.

Minutes – Elizabeth Murray

- Motion to approve – Bob Breese. Seconded by Ben Ostrovsky. All in favor, no opposed, no abstentions. Motion passes.

State Actions – Bob Breese

- Kenneth Relyea, Cannastota, NY for violation of 10 NYCRR Part 800.16 (a)(7) which is related to fraudulent recertification.

Patient Safety Subcommittee – Elizabeth Murray

- Now accepting resumes for 4 open positions (3 at large and 1 physician)
- Reviewed three new referrals since last REMAC
 - The Just Culture movement has been truly implemented in 2016.
- Pediatric Cardiac Arrest/Intubation/Sick Kids is ongoing
 - Any case where the child is critically ill.

ALS Subcommittee – Julie Jordan

- No action items.
- Next meeting will be after the Protocol rollout to ensure everyone is on the same page.
- Last meeting helped to facilitate the new changes with the Pharmacy program.

Protocol & Policy Subcommittee – Bob Breese

- MLREMS Policies updated to reflect collaborative protocols.
- Collaborative Protocols
 - Training for protocol roll out in editing phase
 - Date for roll out to be announced soon
 - Please note – the Collaborative Protocols do NOT supersede the State BLS Protocols.

RSI Subcommittee – Elizabeth Murray

- No action items.

SCT Subcommittee – Bob Breese

- Notice of intent received from Monroe Ambulance informing REMAC of their application for NYS transfusion service (no action is required)
 - SCT Training day was a success, well attended. We will be having more like that on an annual basis.

Council (MLREMS) – Elizabeth Murray/Mark Philippy

- All those who are currently seated who have requested to be reinstated have been.
- Election for REMAC officers will be held in March.

Training & Education – Bob Breese

- Instructor Exam Education TAG
 - Problems with new instructor exam, the pass rate is 50% which is abysmal. This exam is in place of the previous exam so that when you recert you can take it once and you are good for life instead of retaking it every three years.
 - We are looking at creating a prep course. If you are interested in participating, let us know.
- ALS/BLS changes to practical exam that have to be incorporated into current classes.

State Council Meetings – Mark Philippy

- FDNY pilot project for CFR to give albuterol, aspirin and epinephrine has been turned down due to the fact that some EMTs in the State are still not permitted to give albuterol, which would cause continuity of care issues. SEMAC approved it, council did not. Sent back to FDNY for revision.
- They are not receiving PCRs on a regular basis.
- Existence of the window from 2 hours to 4-5 hours for Stroke.
- BLS Protocols will be revised.
 - Anyone interested in participating in this TAG, let us know.
- CIC – Training station 5 – Spinal Immobilization has been removed.
- Critical Care level EMTs – how we are going to maintain this level in NYS.
- Class 3 (Controlled substances) license – if you don't have that for your agency, you need to get that updated, as of 2/1/17, the State is
- If you are looking at ambulance purchases, review the NFPA 1917 or CAAS standards as the revisions when they happen, it will get away from setting a State standard. It will require some specified equipment.
- Fitness and Competency – we send them to the State, however these are still our responsibility to have a discussion on them on the record at our Council meetings. This way if there is an appeal, they can look back at our Council meeting to verify.
- Survey being put together by State Council to look at workforce trends in EMS.
- Collaborative Protocols – These protocols do NOT supersede NYS BLS Protocols. Keep this in mind as certain protocols do not align.
- Part 800 24&25 is to be revised as to what you need to carry on your ambulance.

Regional Trauma Advisory Committee – Bob Breese

- Working to expand MIST to SEMAC
- Promoting “Stop the Bleed Campaign”

Individual Hospital Reports

RGH – Eran Muto

- Vascular program is up and running.
- Approval for expansion of a current building including a surgical center.

SMH/Strong West –Erik Rueckmann

- No Report.

Highland – Timothy Lum

- New obs unit. This is a hospital wide obs unit (27 beds), separate from the ED obs unit.

Noyes – Amy Pollard

- No Report.

Unity/St. Mary's – Bruce Thompson

- A few physicians have noticed that Fentanyl use seems to be used more often than needed. Dr. Lum seems to have noticed that it has been used more liberally in general. Use for minor injuries and chronic pain. Worth looking at and reviewing for a month or two. There has been a lot of push by Medical Director's to use Fentanyl as it takes effect during transport time without affecting the blood pressure, which might be why you are seeing the increased frequency. Are they concerned of excessive use of opiates or dosing? More concerned of use of opiates. Eran Muto – overdosing a patient on it, vs more frequent uses. Acute pain vs chronic pain. We need to tread lightly as we don't want to have EMS providers not treat pain. Is there a way for a provider to know about patients on pain management programs?

Old Business – Bob Breese

- Narcan – no new agencies
- Perinton Ambulance has started providing ALS service
- Approval of Blood Policy
 - Motion: Bob Breese: Move to approve the Blood Product Administration Policy as circulated previously and reviewed and amended. Seconded by Eran Muto. Motion passes.
 - Discussion: where do we stand with that as far as agencies and hospitals?
 - State requires that any agency with EMS personnel be an approved transfusion service. Any blood product that is currently hanging or would be hung during transport. There has to be agreements between the blood banks, which is currently in processed.

New Business – Elizabeth Murray

- Election of officers in March based by law revision. Letter of intent needed 10 business days prior to the election.
- Members: please write a good email address for Mark so that we can reach everyone.
- Lee Burns, Director of NYS EMS to attend our next meeting.
- Do we want to formally include representation from Urgent Care on this body?
 - Some run by hospital systems, others are not, but something we should think about as there are more and more of them that our services are answering to multiple times a day.
 - No – the ones that are run by hospitals can run any issues back through their hospital systems. If the other outliers attend, it opens them up to ridicule.
 - Possibly involve them more in the patient safety committee?
 - Alarming that Urgent Care centers that send patients via private vehicles with chest pain or similar ailments. If it hasn't happened yet, it's inevitable that something will. Perhaps if they are involved in this body, we can address some of those issues.
 - EMS Providers don't understand the capabilities of Urgent Care Centers, and each of them are different.
 - i.e. Penfield UC has an AED, but no arrest drugs.

- Is there benefit to the patients if we bring them to this table? Teach them when to engage EMS versus send via private vehicle to the hospital?

Motion to adjourn – Elizabeth Murray, Seconded by Bob Breese.

Next Meeting is Monday, March 20, 2017 at Monroe County 1190 Scottsville Rd, Rochester, NY at 1700

Link to view full meeting video:

<https://youtu.be/xAZaxKzRrsA>