

MEDICAL ADVISORY COMMITTEE

Minutes of the October 14, 2015 meeting held at St. Joseph Hospital.

Present:

Doug Boileau, EMT-P	Arcata-Mad River Ambulance
Larry Wood, EMT-P	CAL-FIRE
Tina Wood, RN	CAL-ORE Lifeflight/NCEMS
Jaison Chand, EMT-P	City Ambulance
Kayce Hurd, EMT-P	City Ambulance
Ron Sandler, EMT-P	Del Norte Ambulance
Charles Tweed, EMT-P	Del Norte Ambulance
Sherry Gallagher, RN	DHHS--Mental Health, Humboldt
Jet DeKruse, RN	DHHS--Mental Health, Humboldt
Tim Howard, Sr. Medical OA	DHHS--Public Health, Humboldt
Donald Baird, MD	DHHS--Public Health, Humboldt
Tim Citro, EMT-P	Humboldt Bay Fire
Angel LaRue, RN	Jerold Phelps Hospital
Steve Engle	Mad River Community Hospital
LyRae Sullivan, RN	Mercy Medical Center, Redding
Crystal Walsh	Mercy Medical Center, Redding
Stayce Curry	North Coast EMS
Louis Bruhnke, EMT-P	North Coast EMS
Larry Karsteadt	North Coast EMS
Selinda Shontz	North Coast EMS
Cheryl Wraa, RN	North Coast EMS
Janis Polos, RN	Open Door Community Health Center
Jennifer Fulkerson, RN	Redwood Memorial Hospital
Aaron Blue, MD	St. Joseph Hospital
Tracie Connor, RN	St. Joseph Hospital
Lisa Neuger, MD	St. Joseph Hospital
Traci Siler, RN	St. Joseph Hospital/Redwood Memorial Hospital
David Southerland	St. Joseph Hospital/ Redwood Memorial Hospital
Joni Freitas	Shasta Regional Medical Center
Pat Hoover, RN	Sutter Coast Hospital

1. INTRODUCTIONS/APPROVAL OF MINUTES

Tim Citro was at the last meeting but was not included in the list of those present. Otherwise, the 09/09/15 meeting minutes were approved.

2. PRESENTATIONS

Shasta Regional Medical Center

Per Joni: Their new general psychiatric unit, "Path to Wellness" is opening the first week of December. The unit is voluntary, for patients aged fifty-five or older, and has twenty beds. It is the only unit of its type in the region. The Center will take patients for this unit from outside Shasta County. Shasta Regional hired a new full-time cardiac surgeon, Dr. Mazar and a new cardiologist, Dr. Mufti. Their pulmonary department received national accreditation from the American Association of Cardiovascular and Pulmonary Rehabilitation. Their Intervention Radiology department expanded. They now have a third cath lab. Dr. Robert Coronado is conducting a symposium in Redding at the end of October. Shasta Regional is a level 3 designated trauma center, and a STEMI designated center.

Dignity Health, Mercy Medical Center—LyRae Sullivan, RN, Manager Trauma Service

Per LyRae: Dignity Health will start doing more outreach to other counties in the region. They have changed their model of transferring patients to speed up transferring patients, especially traumas. LyRae wants to hear of any trauma transfer problems so she can attempt to resolve them. Mercy Medical is a level 2 designated trauma center, and a STEMI designated center.

Open Door Community Health Centers—Janis Polos, RN, MSN, Nursing Director

Per Janis: She is involved in a project called “Super Utilizer Community Huddle”. The project began at St. Joseph Hospital but now Open Door has taken the lead. Members of this project meet with various community entities to discuss the issue of patients who are over-using the tertiary care system instead of going to a primary care provider. The goal is to keep people out of the hospital ERs when it is not necessary for them to be there. A similar project has begun in Del Norte County. Jaison has recently joined the project in Humboldt. Janis wants to be a resource for answering questions about the project. If any members want to be involved, let her know.

3. OLD BUSINESS

North Coast Paramedic Program

Per Doug: Five students have completed the program. Six are continuing their field internships. The accrediting committee sent information about the self study—it is due next April 1st. In response to the study, a significant number of surveys will need to be conducted, and the Advisory Board will be reconvened. The site visit will probably be several months later.

MCI Channel Updates

Per Larry W: RWS made repairs to the Pratt Mountain repeater. Per Angel: Jerold Phelps could not hear the test on the MCI channel, but it worked on the Garberville ambulance channel. Per Kayce: The Pratt repeater would not switch from the Garberville dispatch to MCI. Kayce contacted Wayne from RWS about the problem. A discussion ensued on who owns/purchased the MCI repeaters, thus who is responsible for insuring they are working properly. No one is certain who is responsible. Per Dr. Baird: The repeaters may have been purchased through Homeland Security funds. Louis believes Charlene Pellatz, Public Health Emergency Preparedness Coordinator, may have the answer.

Image Trend and HIE Program Update

Louis summarized the HIE Program. NCEMS received a \$60,000 grant this year, most of which was used to fund a “discovery project” for implementing the exchange of electronic real-time patient information among ambulances and hospitals in this region. Most of the funds allocated for this project have been spent. Louis believes the state has overestimated how well integrated HIE is among hospitals and other healthcare providers. NCEMS has discovered that most data sets from providers in Humboldt and Del Norte counties cannot be shared with the state. Lake County is more integrated in HIE and their data may be more compatible with the state. Sonoma county uses the same HIE as does Lake; Sonoma is very interested in the discovery project. Larry attended an HIE conference in Mendocino, which uses Redwood Med Net. They are also interested in the project. NCEMS is in discussion with Redwood Med Net to present a proposal to the state to collaborate on the project. Louis’s model for the project is San Diego’s “Beacon Project”. Louis believes the project will take several years to complete.

Part of the grant was to be used to build a “back end” section to Image Trend, similar to the one that existed with EPCIS, which would receive data back from Image Trend in bulk to run queries and reports on patient transports. This project has proven to be very difficult to implement. Image Trend is involved with many other projects and has not been available to help with the back end project. The transition from NEMSIS 2 to NEMSIS 3 will probably be delayed until 2017. The vendors such as Image Trend say they cannot migrate as quickly as the state EMSA had wanted. NCEMS does not want to use NEMSIS 2 for the back end project.

A third project of the grant was to subsidize purchasing of hand-held mobile devices for providers to write PCR's. One of the seven providers who originally planned to use mobile devices decided against it, so funds allocated for them were not spent.

Infectious Disease Update

Dr. Baird discussed yesterday's tabletop exercise (leading up to the statewide Medical and Health Exercise in November). The scenario was a pandemic flu outbreak. Per Dr. Baird, the influenza strain in the scenario is H5N1. This strain was similar to the worldwide outbreak that began in 1918 during WWI. Dr Baird believes a pandemic such as H5N1 will strike the United States in the future. To prepare, medical providers need to start thinking about the concept of rationing healthcare. Our society is not yet prepared for healthcare rationing, but it may be necessary.

STEMI Program Update

Per Larry: The site visit to St. Joseph Hospital went well. NCEMS received and reviewed the report and sent it to St. Joseph. NCEMS finished a draft of the STEMI receiving center contract and sent it to St. Joseph as well. Per Dr. Baird: Humboldt County's cardiac outcomes have improved since St. Joseph established the cardiac program. Unfortunately the county is the bottom in the state on stroke outcomes. Dr. Baird wants the county to establish an effective stroke program to address this problem.

Exclusive Operating Area/Transportation Plan – Humboldt County

Per Larry: NCEMS is revising the draft of the transportation plan. Revisions include timelines on contracts and inter-facility transfer exclusivity for City Ambulance and Arcata Mad River Ambulance. There are no known inter-facility transfers utilizing out of area ambulances originating from Mad River or St. Joseph, other than for specialty care or mutual aid requests in the county since 1981. Once the plan is finalized it will be sent to the state.

Patient Destination Policy—Request to Provide Notice that a Unit is on the Way

Louis distributed a draft policy on Destination Determination. He specifically directed members to section IV-C. Committee members were unsure if Dr. Gerdes, who brought this issue to the committee's attention last meeting, had seen it. Ron believes that a transporting paramedic is always supposed to provide a report to the receiving facility, not just under the circumstances mentioned in IV-C. Per Louis: On a patient bypass, the transporting paramedic often relies on the bypassed hospital to send information to the receiving hospital. Sometimes a paramedic will make base contact late in the transport. Some of the language removed from this section may need to be reinstated for clarity. Ron suggested adding the phrase "while in transport" so the policy would not be miss-constructed as meaning when a patient arrives. Regarding the phrase "not being transported to the closest facility", Doug suggested changing it to say "not being transported to the base hospital".

MCI Channel Update

Per Louis: There has been discussion on incorporating transition from a single MCI to a widespread disaster into the MCI plan. Doug and Jason have ideas on repurposing how the MCI channel is used. Tina is assigned to review these two issues. Per Tina: Pandemic flu emergency needs to be incorporated into the MCI plan.

Potential Stroke System Options

Per Larry: NCEMS is now drafting stroke plan regulations. Finalizing those regulations will take more than a year to be finalized and approved. He distributed an article on thrombolytic therapy in stroke patients that states early use of tissue plasminogen activator (TPA) for non-bleeding stroke increases survival rates. Dr. Blue disagrees, stating many other studies show TPA to be no more effective than other drugs. He believes TPA only helps an unknown subset of patients, and increases the bleeding risk in most patients. New policies for the College of Emergency Physicians recommend using TPA only for level 2 patients. Treating a stroke patient within the first three hours is critical. Per Doug: Ambulance EMTs try to identify when the first stroke symptoms have occurred and convey this information to the hospital emergency physicians. Per Larry: In Lake and Del Norte Counties, many

physicians use the telemedicine connection to the stroke center in Santa Rosa to help make decisions. Per Dr. Blue: St. Joseph has a teleneurology unit. Per Louis: NCEMS will set up a process to develop a consensus and stroke policy. He invited Dr. Blue to be involved. Dr. Blue believes the main reason Humboldt County is near the bottom in state stroke outcomes is because this is a more remote rural area, and not because of poor performance by any local medical providers. Often stroke victims do not get reported or seek treatment for hours or even days after the stroke.

Use of Standby Ambulance on Fires—Update

Louis discussed the Valley Fire in Lake County. Fire companies around Lake are ALS based. In the event of a disaster, they have a single Fire Rescue Coordinator who is responsible to coordinating both the EMS and fire resources. This caused problems because fire and EMS personnel are focused on their particular duties and were not communicating with each other. There was no plan for right of first refusal for outside ambulance companies vs. local ambulance companies. Outside ambulances need authorization to come into another area, but ambulances must not be delayed when needed. NCEMS is going to address these problems. Per Ron: Several years ago the US Forest Services moved to a “Viper Program” and tried to incorporate local ambulance companies, but found similar problems Louis mentioned. They now rely on local contracts with ambulance companies.

3. NEW BUSINESS

Pratt Antenna and Rogers Peak Repeater Repair Plans

(Pratt was already discussed under MCI Channel Updates)

Per Doug: Roger’s Peak is still not working and has not worked for a long time. Wayne from RWS is scheduled to visit the Roger’s Peak repeater site with county representatives in early November to assess what is wrong. There are other county-owned repeaters on the site. Jason is concerned with all the repeaters eventually wearing out and who will replace them. No one has taken responsibility for paying for repair and replacement. Per Larry: Med-Net equipment was originally purchased by NCEMS through a grant, and responsibility for maintaining and replacing the equipment was transferred to ambulance companies and hospitals in the region. NCEMS has an established trust fund to help with maintenance, but the fund is limited. No such plan was put in place for MCI equipment. Per Dr. Baird: The committee he sits on consisting of Public Health, fire and law enforcement organizations has access to Homeland Security funds; send Wayne’s report with cost estimates to Dorie Lanni, OES. Ron suggested looking at newer, less expensive technology such as satellite and cell service, before investing in repeaters. Doug believes cell and satellite service would be less effective than the repeater system. Charles requested a map of all the repeaters in the region. Cal-Fire, OES may have such maps. Lisa suggested medical providers have HAM radios as an alternative to the repeaters, instead of cell phones.

4. NCEMS Report

Per Larry: The next governing board meeting is on 10/29/15, 10:30am at their office. Larry sent out proposed revisions to the inter-facility transfer policy. NCEMS conducted an EDAP site visit at Redwood Memorial Hospital yesterday as part of the EMS for Children project. Cheryl is reviewing the findings. Per Cheryl: She has received good feedback on pediatric issues from EMS providers, but wants more feedback from the hospitals. If hospitals want pediatric-related trainings, NCEMS has grant funding to pay for them. Larry reminded committee members that NCEMS has pediatric equipment available for checkout. After the MAC meeting, they will conduct an EDAP visit at St. Joseph. NCEMS is planning a training next spring on EMS for Children, and cultural sensitivity trainings next year. Larry distributed information about a new law requiring emergency medical care providers to use an electronic health record system when collecting and submitting data to a local EMS agency. This system must comply with CEMISIS and NEMISIS. The law does not allow a LEMSA to mandate a specific health record system. Per Larry: NCEMS thus cannot mandate providers use Image Trend, but any other system providers may use must integrate with NCEMS’s system. Per Larry: The annual EMSAs pediatric conference is scheduled for 11/05/15. If any members affiliated with EDAP want to attend, money from the Richie’s fund is available. Ron discussed an article advocating BLS ambulance

service instead of ALS for critical patients. Per Doug: The study Ron cites is controversial; critics say the reason is there are more ALS ambulances sent for critical patients than BLS, thus BLS would have better outcomes.

Stayce has been attending behavioral coordination meetings in Lake County. They are discussing 5150 and crisis intervention issues. Hospitals are offering 2-3 day crisis intervention training. Four hundred employees at Sutter Lakeside Hospital are taking a three hour course on managing assaultive behavior. A lawyer from Sutter Health discussed 5150 issues and cited Stayce's 5150 website. Lake County has a Mobile Crisis Team consisting of county Behavioral Health personnel who go to hospitals and make assessment on 5150 patients and determine if they should be released. Stayce does not have much information on how the Valley Fire has affected the medical providers, except they were extremely busy during the fire.

Per Louis: NCEMS is forming a policy review committee with representation from all three counties. They are attempting to find a meeting facility in Del Norte for the conference call; Lake has a facility finalized.

5. EMS Commission Report

Per Jaison: The epi auto injector policy was approved. EMSA's training outline for using the auto injectors is forthcoming. Some of the training is waived for RNs and other medical professionals. There is a \$45.00 EMSA fee. The Commission is still discussing 911 call routing (mainly affects southern California) and community paramedicine. The Commission is looking at several pilot projects throughout the state, but is mainly interested in post-discharge and alternative destination for initial transport projects. Those projects have all been approved in the counties conducting them. The Commission will present a report at the December 7th meeting on the status of the projects.

6. Facility Reports

St. Joseph Hospital—Per Traci: They could not establish a telemedicine link with UC Davis on last Friday's test call. Per Tracie: They have an EDAP site visit today. She introduced Jennifer Fulkerson, new PCNC and new PDLN, and Lisa Neuger, new trauma surgeon and surgicalist. Per David: As surgicalist, Lisa is committed for ten hours per day at the hospital, and after her shift she is on "unrestricted call" where she will take calls from home. Their surgical call program is now fully staffed. They are recruiting for their other specialties such as orthopedics and ENTs.

Del Norte Ambulance—Per Ron/Charles: Nothing to report.

DHHS—Mental Health—Per Jet: They are meeting regularly with St. Joseph's ER on a variety of issues. Regarding the new BOS 5150 resolution, ER doctors and Mental Health Clinicians can rescind 5150s. Mental Health and St. Joseph is setting up rescinding trainings. Mental Health does not have the staffing level to be able to go to a hospital to assess 5150 patients for rescinding. They are working on increasing their staffing levels to serve this purpose. Per Jaison: City Ambulance would like to continue to be involved in 5150 discussions due to regulations transferring patients from a hospital ER to Mental Health. Per Jet: Mental Health is working with the Eureka Police Department to help mentally ill homeless residents. These residents have a lot of contact both with the police and crisis unit contacts. The program is working well. They have helped house fifteen people at the new ABC housing facility in Arcata.

CAL-FIRE—Per Larry W: Fire Season is winding down.

Open Door Clinics—Per Janis: Nothing else to report.

City Ambulance—Per Jaison: Their units now stock Fentanyl. By the end of this week, all their paramedics should be trained to use Fentanyl. The on-call crew for long-distance transfer has been busy. The new crew has been a success. They are working on a disaster evacuation plan. Jaison has attended Service Coordination Committee (SCC) meetings to discuss including transit companies in the county's emergency plans. He helped arrange a meeting on 12/21/15 to include all the stakeholders. He now also attends the Super Utilizer Group, which is forming solutions to the problem of patients who regularly use ambulance and hospital services unnecessarily. The group has successfully found solutions for some chronic patients. City Ambulance purchased a satellite phone for their dispatch communications center through the Hospital Preparedness Program (HPP) grant. They are now considering removing their HAM radio. Dr. Baird cautioned that satellite communications have drawbacks. On 10/19/15 they will hold an EMD meeting to discuss when Humboldt Bay Fire does/does not respond on Code 2 calls into facilities and traffic accidents.

Humboldt Bay Fire—Tim C discussed an article about their new two-person squad vehicle they recently deployed with the purpose of improving response in Fire Station 1 and 4 areas (Larry distributed the article earlier). They will evaluate the program after a three-month trial period. They have hired a consultant to research community paramedicine. They are losing one paramedic but gaining two more within the next month.

Jerold Phelps—Per Angel: Nothing to report.

DHHS—Public Health—Dr. Baird is still communicating with Mental Health on issues with their psychiatric physicians. He is also working with St. Joseph Hospital's ER doctors on 5150 issues. The County Board of Supervisors (BOS) has revised the county's 5150 regulations to allow more flexibility in releasing 5150 patients. Public Health has partnered with other medical partners and organizations to combat opiate overdoses. Licensed physicians must, as of 2016, be enrolled in the CURES program. As a result, the amount of opiates local physicians are prescribing has decreased. Unfortunately, the number of opiate-related deaths in Humboldt has remained the same, and suicides specifically related to opiate use have increased. Per Tim H: Public Health is preparing for flu season. The Public Health Clinic will begin scheduling clients for flu vaccines on 10/19/15. Per Dr. Baird: This year experts believe the flu vaccine will provide better coverage than last year's.

Sutter Coast Hospital—Per Pat: Nothing to report.

Arcata-Mad River Ambulance—Per Doug: They purchased two computers and installed mounting towers and antennas on their ambulances for them. They are currently using them to write Image Trend reports. The next step is to integrate CAD information from CAL-FIRE into those computers.

7. Next Meeting: Wednesday 11/18/15 at Redwood Memorial Hospital, Renner Room, 9:00 a.m.