

MEDICAL ADVISORY COMMITTEE

Minutes of the January 12th, 2022 meeting via Zoom

Present (Via Zoom):

Lynne Kinniburgh	Adventist Transfer Center
Doug Boileau, EMT-P	Arcata-Mad River Ambulance
Graham Felsenthal, EMT-P	City Ambulance
Jaison Chand, EMT-P, RN	City Ambulance/REACH/Calstar
Katie Baza	City Ambulance
Charles Tweed, EMT-P	Del Norte Ambulance
Darrin Short	Del Norte County Supervisor
Kelly Johnson	DHHS Behavioral Health
Tim Howard	DHHS Behavioral Health
Tim Citro, EMT-P	Humboldt Bay Fire
Ian Hoffman, MD	Humboldt County Public Health
Jason Orlandi, MSN	Mad River Hospital
Philippa Watkins, LMFT	Mental Health
Stayce Curry, LPT RN	North Coast EMS
Kayce Hurd, EMT-P	North Coast EMS
Larry Karsteadt	North Coast EMS
Patrick Lynch, RN	North Coast EMS
Matt Karp, MD	North Coast EMS
Dennis Louy	North Coast EMS-Del Norte
Laura Sealock, RN	REACH Air-Santa Rosa
Pamela Collver, BSN	Redwood Memorial Hospital
Sarah Parks, RN	RMH and St. Joseph Hospital
James Goldberg, MD	St. Joseph Hospital
Kari Vandiver, BSN	St. Joseph Hospital
Tracie Conner, RN	St. Joseph Hospital
Michelle Buchanan, RN	Sutter Coast Hospital

1. Introductions/Approval of Minutes from the November 11, 2021 meeting.

2. OLD BUSINESS

- **Paramedic Program Update**

Per Doug the 2020-2021 class had 27 students that were eligible to enter the field. 1 dropped and is expected back this next semester, 1 received an incomplete and is working to complete his internship, 22 are now paramedics, 2 have not yet tested and 1 has not yet passed. For the current class, 18 started the program and 1 has dropped. 17 are continuing and 1 is rejoining after dropping during the last year. Surveys will be going out soon to graduates and employers of those graduates for the class of 2020.

- **Trauma**

Per Larry, responses for the last Trauma Survey Findings Letter have come in from Sutter Lakeside, Lake County, and Mad River Community Hospital. Rita is currently reviewing those.

- **EMS for Children**

Per Larry, The state EMS Authority gave the local EMS agencies a break on Trauma and EMS for Children plan updates due dates due to Covid, but they still plan to have them in shortly after the Governing Board meeting in February.

- **STEMI Program Updates**

Per Larry, the STEMI plan update has been drafted and is currently being reviewed by NCEMS. This and all other plan updates will be available down the road for public review.

- **Behavioral Health Update**

Per Stayce, reminder of the Medical Peer Support Groups that are held by zoom every 2nd Tuesday and 4th Thursday of each month. They are held even on holidays. Stayce put the contact information in the chat. (medpeer707@gmail.com)

Per Kelly, they continue to have staffing challenges and the mobile response team has also felt this with scheduled time off and Covid related absences. She wanted to acknowledge the effect this has on the hospitals.

Per Philippa, mental health is currently full but there will be two discharges from SV today which will open up a little space for the hospitals.

Pam asked for an update on Covid quarantine practices for covid positive mental health patients now that the CDC has changed its guidelines. She reported that they are currently holding an extremely violent patient who cannot be moved out of their ER due to quarantine requirements from mental health. Per Philippa, they are reviewing the requirements and do have a contract with Heritage Oaks to accept those patients as their policy is still the 10-day quarantine.

Stayce added that the hospitals do each have at least one MD who can write and release a 5150.

- **Infectious Disease Update**

Per Dr. Hoffman, we're at the beginning of our Omicron surge in Humboldt and are still seeing some effects from Delta as well. Omicron is looking to be less severe than the last variant but more easily transmissible. There are currently 18 hospitalized covid patients in the county. Based on data from areas that have already been well into their surge, we seem to be in the first couple weeks of ours with several weeks (4-5) more to go. The antibody clinic is also seeing a change in what they're using due to Omicron responding differently to Delta. St Joseph Hospital and Public Health are working together to find the best course of action. Additionally, they are continuing to spread awareness about the high rates of syphilis in the area, especially in young women of child bearing age. Many members of the committee, including Doug and Larry, thanked Ian for his service and wished him well in his return to clinical medicine as he steps down as the county Health Officer.

- **North Coast EMS Policy Update**

Per Kayce, she has been bogged down with admin policy updates (destination and med-net as well as streamlining the QIP policies). She will be returning to the treatment policy updates soon.

- **Streamlining the Accreditation Process Update**

Per Larry, NCEMS has been working on dropping the PCMD signature requirement and keeping the PCNC. Additionally, FTO candidates will be following the same signature requirements. He did correct a statement from a previous meeting that the accreditation process will not be moving to an online application.

Kayce clarified that, while they are dropping the PCMD and keeping the PCNC signature requirements, paramedic candidates can turn in their applications without the PCNC's signature to be processed, and collect that later. It is not something that will delay their application. She reported the e-PCR is still problematic in that all PCRs are not posting to the online forum and fixing that issue will make the process faster and more efficient.

- **Ambulance Exclusive Operating Area Updates**

Per Larry, a summary has been sent out but, effective Jan 1st, 2022, both City Ambulance and Arcata-Mad River Ambulance have been grandfathered in as exclusive operating providers. This has been a long time coming and has been a very involved process for everyone. This protects the providers and holds them to performance standards in the area. Larry thanked both Doug and Jaison for their hard work through all this.

Per Larry, they have also been working on an EOA for Del Norte Ambulance, which is still in progress. They have confirmed that DNA is eligible for grandfathering. The next step will be action by the Del Norte County Board of Supervisors in support of the EOA. If support is granted, we plan to follow the same model that was used in Humboldt.

- **North Coast EMS Bypass Policy Discussion**

Per Larry, SJH made a request last week due to staffing shortages that ambulances not bypass closer facilities based on patient preference. Per Sarah, when the request was made, they had 14 ED caregivers out with Covid, they were unable to adequately and safely staff the ED and are grateful for the accommodations made for the pt preference bypass. She reported that they have since staffed MHOAC nurses and are ready to go off bypass as of this morning. She reiterated that they were unable to safely provide patient care during that time due to staffing. Larry requested that she send out a formal notice rescind the bypass. Per Larry, there is generally a no diversion policy due to past issues with circular diversion from hospital to hospital. Currently, the only allowed reasons to divert would be internal disasters that left the facility incapacitated, such as an earthquake that collapsed the building. He clarified that this request was not actually a diversion and asked that, in the future, everyone is very careful with the wording that is used. The request

was that the other hospitals NOT be bypassed in favor of SJH for services that could be provided at RMH and MRCH. NCEMS supported this attempt to alleviate some of the pressure on SJH. Larry clarified that no patients were being forced to go to a hospital that they didn't want to, this was just a request. Sarah requested a more structured way to make this kind of request in the future. Dr. Goldberg expressed his thanks to everyone involved in the situation and how it was handled. He also explained that the purpose of such a request was to spread the weight more evenly throughout the county and not bring all the patients to their ED. Graham reported that City did a 7-day lookback on all bypasses and found only one that was a pt preference, the rest were Dr. ordered bypasses. Jaison reported that there was some confusion on the day the request was being made. The email chain the next day clarified things but there were communication issues during the initial request. He suggested having the House Supervisors in the hospitals being in direct communication during these requests. Dr Goldberg asked what the best way to communicate these requests to local EMS.

Doug advised that he wasn't contacted until the next morning although his on duty crews were alerted after the hospital contacted the City Ambulance Communications center directly. He also advised that this is a system and they cannot take direction from the hospitals individually. That direction can only come from NCEMS. Per Doug, they have implemented a process to avoid the pt preference bypass, which seems to work well. He requested a process through NCEMS of notification, regardless of time of day.

Per Larry, he believes that City Ambulance Dispatch center is going to be the key for notifications of this kind. NCEMS is not a 24 hr center, while City is. If City is the first step in notification, they can then take the next steps in alerting those who need to be aware of the requests.

Discussion followed regarding the more rural hospitals and how bypasses may apply to them in some of these disaster situations. Dr. Goldberg asked if NCEMS had any kind of on-call person for emergency situations. Larry advised that there is not but they are interested in facilitating some process of notification for times where they are not available.

Kayce asked if SJH reached out to the other hospitals in this particular situation to see what their staffing and impaction looked like prior to this request being made. We need to ensure that we are not passing a problem from one area to another by making a request like this. She also suggested that EMS could possibly provide support to the EDs in providing care during times of staffing crisis.

Doug advised that we could set up an internal notification as long as NCEMS gives the authority and has a process for the request to be implemented. Per Dr. Karp, there are a couple of issues being discussed. First, the notification and then also the process of having some kind of stop on patient preference bypass in times of impaction or disaster. He also acknowledged how important it is to keep SJH available for Trauma and STEMI patients who require the specialty care.

Graham added that City Dispatch can be involved in the notification but it would be communication only, there would be no decisions made on our end. He also clarified that most of the bypasses by our ambulances are being made from hospital direction, not patient preference. This needs to be a system communication for bypass determinations if we're wanting to reduce the pressure on certain hospitals. Doug suggested that we table this to Old Business for next month. Larry added that they have been looking at APOT and we are still looking very good in our area, especially compared to other areas. We may see that going up with everything going on, but are currently sitting far below the times that some areas are dealing with. He suggested that the EMS providers and NCEMS meet before the next MAC meeting to discuss the notification process. Kari added that Sarah would be very interested in attending and Larry added the hospital representatives to the list of those who should attend.

3. NEW BUSINESS

- **Global Transfer Center Discussion – Lynne Kinniburgh**

Per Larry, he invited Lynne today as they have been in discussions regarding the transfer issues that they have been handling in Lake County. The ATC provides a service in Lake to move psychiatric patients efficiently who may not otherwise be moved.

Per Lynne, their transfer center specializes in placement of both medical and psychiatric patients as well as disaster placement. They are the center for 17 hospitals in California and work to place and then arrange transport for their patients. They are able to track the available beds and swiftly place patients due to that. They are open 24/7 and access to their services could be discussed on an individual basis if local hospitals were interested.

Larry asked how the transfer center coordinated ground transport with bed placement and if there was coordination with local services. Lynne explained that they start with the local EOA and will work directly with the facilities and companies to move the patients. They often come up with creative solutions working with local agencies directly to have patients transported. She also reported that their relationships with the receiving facilities often allowed them more flexibility in holding beds when immediate transport is not available. Lynne left her contact information in the chat if anyone would like to reach out. (707) 999-1352 Lynne.kinniburgh@gmr.net

- **Approve 2022 MAC Meeting Calendar**

Doug advised that the 2022 MAC calendar had been sent out to everyone for review and that the currently plan was to stick with the Zoom meetings. Larry deferred to Dr. Hoffman and asked if he had any advice regarding continuing the Zoom meetings or not. Dr. Hoffman agreed that it was important to continue to not gather, especially with the start of this new surge. Larry suggested we continue the Zoom for next month and revisit the idea of in person later. The idea of eventually having blended in

person and zoom meetings to allow those members who are further out the ability to easily attend was discussed and supported.

4. NORTH COAST EMS REPORT

Per Larry, the JPA board meeting is coming up on Feb 24th. This was going to be in person but there is discussion of moving this back to virtual due to the current Covid climate. Local EMS plan updates are in progress as previously reported.

5. EMS LEGISLATIVE REPORT

Per Jaison (via Doug), legislature is getting back into gear and the bill tracking list should be out by next MAC meeting. Wall time APOT workgroup is meeting regularly. Chapter 13 task force is still on hold. Public comment for Community Paramedicine and Alternative Destination regulations are on January 18th

6. FACILITY AND PROVIDER REPORTS

Del Norte Ambulance

Per Charles, nothing to report. He reported that he fully supports the blended zoom meeting for MAC meetings. They are continuing to rollout their EMD program.

Mad River Hospital

Per Jason, nothing to report. Balancing low staffing and high patient counts, both due to covid.

St. Joseph Hospital

Per Dr. Goldberg, nothing additional to report. Per Tracie, this is her last MAC meeting as she has taken a new position at a new company and will no longer be PCNC for SJH.

Redwood Memorial Hospital

Per Pam, nothing to report.

City Ambulance of Eureka

Per Graham, City has hired 14 new employees in the last 1.5 months. They have been staffing a ground unit in Lake county to help with patient transports that have been extremely delayed, it is working well.

Humboldt Bay Fire

Per Tim, staffing is holding up and nothing further to report.

DATE AND PLACE OF NEXT MEETING: **February 9, 2022 via ZOOM**