

HEMS, INC.
MEDICAL CONTROL ADVISORY BOARD
MEETING MINUTES
THURSDAY, JANUARY 12, 2006
HEMS, INC.
WAYNE COUNTY PUBLIC HEALTH BUILDING

I. CALL TO ORDER

The meeting was called to order by Michael Calice M.D., Alternate Medical Director.

- A. Dr. Brock has left his position at Oakwood Hospital and Medical Center resulting in his resignation as HEMS Medical Director. Dr. Calice will assume the portion of Medical Director and the Physician Directors recommend Board of Trustees appointment of Dr. Bacigal to the Alternate Medical Director's position. A motion was passed to approve the motion to support the appointments.
- B. The MCAB requested that the record reflect our thanks to Dr. Brock for his leadership of and service to our EMS System.

II. ADOPTION OF THE AGENDA

There were no additions and/or modifications to the agenda.

III. MINUTES

A motion was passed to approve the November 10, 2005 meeting minutes

IV. COMMITTEE REPORTS

- A. Nurse Managers- CharTeeter and Amy Noles.
 - 1. W.C. LEPC developed 302 site/hospital planning map
 - 2. Potential 06 exercises: FERMI, Airport, Pipeline, Super Bowl planning.
 - 3. Working to develop a standardized mental health clearance forms.
- B. Communications-Bill Forbush
 - 1. Continuing reminder of Region 2 South 800 Emergency Radio System checks with hospitals each Monday at 8:30 AM.
 - 2. New MEDCOM requirements distributed.
 - aa. Requirement of all EMS vehicles to have 155.355 along with 155.340 by January 2007.
 - bb. All communications between hospitals and EMS MUST be tape recorded (telephone and radio). HEMS radio channels and radio telephone meet the

MEDCOM requirements for our EMS agencies and facilities.

- C. Operations Committee-Rob Bruley and Rick Oziemski
 - 1. MERMAID DATA PROGRAM – Recommendation that the report generated by the MERMAID program be accepted as an approved run report to leave at the hospital, for agencies moving forward with implementation of the free data collection software. Other's using vendor supported software will need to submit report format to the Physician Committee for review and approval. The goal for the future when the final free software is available is to retain standardized run report format.
 - 2. Mini-Protocol Books are being printed.
 - 3. NIMS Grant funding for EMS agencies: HEMS will receive \$10,000.00 to support EMS agencies completion of the NIMS IS-700 program. The Committee recommends that for an EMS agency to be eligible to receive its share of the funding it must:
 - aa. Attend and participate in a NIMS Training Program (Comparable to the Train the Trainer Programs)
 - bb. Submit within 90 days of completion of participation in NIMS Training Program submit documentation of completion of NIMS IS-700 training for all EMS Operations Personnel.
 - cc. Funding left after paying for two classes will be split evenly between the EMS agencies submitting the required documentation of completed Training for Operational Personnel.
 - 4. Tabled until February meeting for EMS agencies to review and to offer additional suggestions by the February MCAB meeting. A motion was passed to formally approve the Annapolis Interventional application.
 - 5. A motion was passed to print and laminate pain chart for use in EMS units.
- D. Pharmacy-Debbie Wagner - No Report.
- E. Disaster-Wayne County Homeland Security/Emergency Management
- F. NDMS – Ken Bresnan - No report.
- G. Critical Care Protocol Sub Committee-Thomas Yeich
A motion was passed to submit to the formal protocol approval process the nitro and heparin drip transfer protocols.
- H. Quality Review-Dr. Brock
 - 1. Highlights from QRC meeting.
 - aa. Case involving Cardio-version reviewed.
 - bb. Case involving pacing vs. administration of atropine.

2. Spinal protocol question - Use of rigid collar on patient over 65 years? *“Patients over the age of 65 with a mechanism of injury with the potential for causing spine injury will have a rigid extrication collar applied even if the spine injury clinical assessment is negative”.*
 - aa. Nurse Managers need to be aware of this protocol change.
 - bb. Dr. Domeier will explore addition of language to the protocol to clarify mechanism of injury (strike mechanism) for this section of the protocol.
 - cc. This section applies as a safety precaution for patients 65 and older if the spinal assessment is negative for injury and not requiring full immobilization, but the “strike mechanism” is such that it could cause possible injury to the head/spine.
3. Agency new Protocol in-service status – Belleville Fire Dept. and Southgate Fire Dept have not submitted documentation of providing personnel in-service on the new protocols. It was stated that HVA is working with Belleville Fire and Southgate Fire’s in-service is scheduled. So our system is 100% up-to-date on the protocol updates/changes.

V. SUPER BOWL PREPAREDNESS – JENNY ATAS M.D., REGION 2 SOUTH MEDICAL DIRECTOR AND JAMES BUFORD, DIRECTOR WAYNE COUNTY HOME LAND SECURITY AND EMERGENCY MANAGEMENT.

1. Planning efforts are in support of the City of Detroit Home Land Security and Emergency Management and EOC operations if resources and so on are needed.
2. Guidelines for EMS agencies and hospital facilities were distributed.
3. An overview of the organization for this event was presented.
4. Agencies will receive updates from Homeland Security to keep them informed.
5. The Regional MCC at HEMS location will be operational as well.

VI. OTHER BUSINESS

- A. HAN registration update – Update on EMS agency registration was e mailed to all agencies.
- B. Next CQI Indicator-Airway.
- C. HEMS / Michigan DMAT Team Annual Golf Outing is scheduled for July 25, 2006 at the Links of Novi!!! MARK YOUR CALENDAR.

- D. MDCH new continuing Ed record form (Handout)
- E. EMS Agency contact information up-date.
- F. MDCH – Distributed draft Medicaid Quality Assurance Assessment Plan for EMS Agencies

VII.

VIII.

CLOSURE

- A. **The next meeting of the 2005-06 MCAB is February 9, 2006, HEMS, INC, Wayne County Public Health Building, 33030 Van Born Road, Wayne, Mi. 48184**
- B. Adjournment to the Service/Physician Director CQI meeting.
- C. **Scheduled CQI reports: SEE ATTACHED CQI REPORTING DOCUMENT.**