

Monroe Livingston REMAC Meeting Minutes
February 21, 2011

Standing Agenda Items

Agenda Review, Manish Shah, MD

- MLREMS ran a little late; apologies for the delay in starting
- Sign-in sheet being passed around; please sign
- Rural Metro appeal re: preceptors
- Anything else to add to agenda?

Minutes, Manish Shah, MD –

- The minutes have been posted on the website
- If no one has comments or edits, motion to approve the minutes
- Moved by Bob Breese; Seconded by Dr. Nasra; All in favor? Ayes

Correspondence / Announcements, Manish Shah, MD

- Letter from DOH being passed around re: certification cards
- The state is having issues printing them
- Temporary cards will be given out until their special card stock is replenished
- Notice from Margie DeLena of Avon Rotary-Lions Ambulance stating that Dr. Jack Davidoff will be taking over as their Medical Director on or before March 13th
- Greece Ambulance will also be changing Medical Directors – from Dr. Lamark to Dr. Riccio
- Welcome to Dr. Bansal from Highland Hospital; this is his first meeting

Medical Directors' Report, Jeremy Cushman, MD

- A number of policies/procedures have come out in the past few months
- A bunch of great education opportunities have rolled out
- Ventricular Device podcast has gone out
- Dr. Murray has been working diligently on a grant developing three pediatric podcasts – they should be out by the end of this week
- Pediatric Pain Management, Pediatric Seizures, & Neonatal Resuscitation
- NYS Policy 111 – allows paramedics to draw blood
- Myself, along with a number of other Medical Directors from Albany & North Country have started developing a set of consolidated protocols that would be the same across the thruway
- Still some significant philosophical difference between those regions & ours
- Not committing to anything until the physicians around this table give their input

Program Agency Administrator's Report, Tracy DeMarse

- Quarterly reports are done; were sent out over a week ago
- Vouchers have been sent to the state
- Council & Program Agency currently undergoing Yellow Book audit; required to do these every three years

Associated Reports

Council (MLREMS), Mark Tornstrom

- Council is working on a plan re: maintaining functionality in lieu of the current budget crisis
- At this point, the Council will maintain the status quo
- We are continuing with the strategic initiatives from Tyler Consulting
- We did not receive award nominations for Physician or RN of Excellence – it is important that people in those areas are recognized
- We should work on this for next year's awards

State Council Meetings, Jeremy Cushman, MD

- No Report

SEMSCo Report, Tim Czapranski

- No Report

State Actions, Tracy DeMarse, MD

- West Sparta received their Agency ID as a BLSFR agency
- State Enforcements

REMAC Sub-Committee Reports

Manish Shah, MD

- Most of the work that gets done in this group gets done in subcommittees
- All subcommittees are open except for QA
- Please contact me if you're interested in joining a subcommittee

ALS Subcommittee, Julie Jordan (Chair)

- Committee continues to meet

Pharmacy Subcommittee, Mike Kuder (Chair)

- One issue identified since our last meeting
- Expired Medication Form has been completed; posted on the website

Protocol Subcommittee & Advanced Practices, Jeremy Cushman (Chair)

- We have a number of action items; all were distributed for public comment
- SCT Policy – a few changes made re: standardizing language & inserting opportunity of individuals to achieve advanced placement
 - Motion to approve; Mr. Breese; Second; Dr. Katsetos
 - All in favor? Ayes; Opposed? Abstentions? Motion passed
- Policy 9.4 RSI Program – language was standardized
 - Motion to approve; Mr. Breese; Seconded
 - All in favor? Ayes; Opposed? Abstentions? Motion passed
- Policy 9.22 ALS Preceptor – has been extracted; will be added under new business following the appeal

- Policy 9.X Orogastric Tubes – distributed for public comment; two items were added to the policy
- Dr. Wolfe questioned why EMS would perform this procedure at all
- This is within their scope of practice; taught in the NYS curriculum
- Practice that requires agency Medical Director approval & therefore does not mandate all agencies carry orogastric tubes
- The procedure is relatively low risk particularly for agencies with longer transport times
- Risk/benefit for pediatrics was felt to be too far on the risk side
- Benefits outweighed risks in Adults
 - Motion to approve; Mr. Breese; Second; Dr. Thompson
 - All in favor? Ayes; Opposed? Abstentions? Motion passed
- Protocol for placement of tourniquets & hemostatic gauze – procedure that has regained favor
- All law enforcement officers in Monroe County were trained on this
- Currently law enforcement can apply tourniquets & hemostatic gauze but EMS providers cannot
- This is also a process that would require agency Medical Director approval
- Should this be passed, we would also like to develop educational podcasts
- Dr. Wolfe questioned tourniquet patients – those patients should be taken to appropriate hospitals/ trauma center
- We are under the State trauma criteria – a tourniquet will not dictate whether or not they go to the trauma center
- Question before the physicians here is whether or not criteria for referral to a trauma center is added – this may be the wrong thing to do in that we may burden the trauma center with patients who are not traumatic but have hemostatic gauze for a laceration to the head
- Perhaps some reference to disposition be dictated by trauma triage
 - Move to approve the protocol; Second; Dr. Rueckmann
 - All in favor? Ayes; Opposed? Abstentions? Motion passed
- Management of Pelvic Fractures – similar conversation re: referral to a trauma center
- Discussion re: whether or not this should be a paramedic skill or not
- One school of thought: if a patient presents with an unstable pelvic fracture, should be immobilized soon rather than later; there should not be a delay in ALS
- Pelvic immobilization device – term being used to refer to it globally
- Move to approve as written – Bob Breese; Seconded by Dr. Murray
- Clarification – an EMT-B or higher would be able to apply such a device
- Group would prefer if the language reflected under suspected pelvic fracture or severe pain and high energy mechanism
- All in favor? Ayes; Opposed? Abstentions? Motion passed
- Planning on developing a podcast for the tourniquet & hemostatic gauze
- Will look at funding for the other two- value in having consistent training for agencies

Quality Assurance Subcommittee, Manish Shah, MD (Chair)

- We have two new members – Kevin Clarke & Tony Katsetos
- Per policy, QA cases that don't have specific significant action on this body are presented in blanket format
- One case under review re: response
- Nothing regional up for discussion

MHA Tag, Mark Tornstrom (Chair)

- No report

Regionalization TAG, Julie Jordan (Chair)

- The preceptor education component is pretty much complete
- We hope to move forward with the training
- We will continue to meet regularly

GRQC Committee Update, Manish Shah, MD

- No Report

Fingerlakes Regional Trauma, Bob Breese (Official Representative)

- Next meeting will be April 5th at 1:30 pm at Strong Memorial Hospital – room TBA

Hospital & EMS Leadership Meetings

- No Report

RHIO, Jeremy Cushman, MD

- No Report

Old Business

- None

New Business

- Tracy is passing around 2011 REMAC rosters
- The open at-large seat was voted on; Dr. Kamali will now fill it
- Rural Metro Appeal re: ALS Preceptor Policy
 - Provider does not meet the criteria defined in the policy (three years of practice) but RMMS would like REMAC to consider allowing them to be a preceptor based on their skill set & education
 - Dr. Rueckmann states additional information, vouching for the provider
 - RMMS is a union shop – providers who take the path of additional jobs are reimbursed; it's reflected in their paychecks
 - Dr. Shah asked by Bob Breese why the QA Committee turned down the provider initially
 - Based on the information presented at the time, there was not sufficient argument to warrant making the exception
 - The QA Committee spent a long time struggling with this; ultimately decided it was our job to enforce the policy this body wrote & approved
 - Given that the agency's Medical Director is promoting this as well as the agency's ALS Chief, then this body could make a decision on this case
 - A lot of time & effort was put into this protocol – it was put into place for a reason
 - When you start going against protocol or policy, you set a precedence
 - We would have to make these exceptions all the time
 - Motion to my appeal & decision of the QA Committee to allow this provider to become an ALS Preceptor in this region; seconded
 - The policy as it reads today states: the agency Medical Director may submit a person for consideration if they don't meet the 3 year criteria – that's what we did; that's why we're asking for consideration

- The policy allows for this; we're asking for what the policy states we can have
- All those in favor of the appeal granting the provider preceptor status, please raise your hand – 9 hands counted
- All those against? Abstentions?
- The appeal was granted; this individual will have preceptor status based on the appeal
- Action item for REMAC re: the ALS preceptor policy
- Changes from credentialing committee to QA committee
- Under item 8 – language was added to allow a preceptor to request a leave of absence
- The Regionalization TAG identified two items that should be clarified re: preceptor eligibility
- Motion; Moved by Bob Breese & Dr. Katsetos; Discussion?
- All those in favor? Opposed? Abstentions? Motion Moved
- Lengthy discussion at Council re: finances at the state
- Funding for program agencies will most likely disappear
- A lot of stuff the REMAC does is supported by the Program Agency, Regional Medical Director, and others
- A loss of funding will dramatically affect our ability to train providers & preceptors, develop protocols & policies and other things have made us one of the leading regions in the State in terms of what we do in health care
- The council will continue to discuss different options; we will keep REMAC informed
- Move to adjourn; seconded
- Next meeting will be on Monday, April 18th in Livingston County