

## REMAC - Meeting Minutes February 22<sup>nd</sup>, 2021

### ATTENDANCE

#	NAME	CATEGORY	MEMBERSHIP	TERM	2020-04	2020-06	2020-08	2020-10	2020-12	2021-02
<b>VOTING</b>										
1	Jeremy Cushman, MD	MLREMS Medical Director	Voting / Ex Officio	N/A	CXL	P	P	P	P	P
2	Maia Dorsett, MD	at Large (seat 3)	Voting	3/31/2024	CXL	P	P	P	P	P
3	Aaron Farney, MD	Hospital - Nicholas Noyes Hospital	Voting	3/31/2023	CXL	P	P	P	P	E
4	Antonios Katsetos, DO	Hospital - Unity Hospital	Voting	3/31/2023	CXL	P	P	P	A	P
5	Timothy Lum, MD	Hospital - Highland Hospital	Voting	3/31/2023	CXL	P	P	P	P	P
6	Vacant	at Large (seat 2)	Voting		VACANT	VACANT	VACANT	VACANT	VACANT	VACANT
7	Eran Muto, DO	Hospital - Rochester General Hospital	Voting	3/31/2023	CXL	P	P	P	A	P
8	Erik Rueckmann, MD	Hospital - Strong Memorial Hospital	Voting / Chair	3/31/2023	CXL	P	P	P	P	P
9	VACANT	at Large (seat 1)	Voting		CXL	Thompson-P	Thompson-P	Thompson-P	Thompson-P	VACANT
10	Constance Verneti, MD	at Large (seat 4)	Voting	3/31/2024	CXL	A	P	A	E	P
<b>NON-VOTING</b>										
11	William Arnold	At Large (Seat 2)	Non-Voting	3/31/2022	CXL	P	P	A	P	P
12	Michael Bove	At Large NYS Certified (Seat 4)	Non-Voting	3/31/2021	CXL	P	P	P	P	P
13	Robert Breese	EMS Course Sponsor	Non-Voting / Vice Chair	3/31/2021	CXL	P	A	A	P	A
14	Lee Collar	At Large NYS Certified (Seat 1)	Non-Voting	3/31/2022	VACANT	P	P	P	P	P
15	William Comella	At Large NYS Certified (Seat 3)	Non-Voting	3/31/2022	VACANT	P	P	P	P	P
16	Timothy Czapranski	EMS Coordinator - Monroe County	Non-Voting / Ex Officio	N/A	CXL	P	E	P	A	P
17	Karen Dewar	EMS Coordinator - Livingston County	Non-Voting / Ex Officio	N/A	CXL	P	P	P	P	P
18	Tim Frost	At Large (Seat 1)	Non-Voting	3/31/2021	CXL	A	A	P	A	P
19	Timothy Kelly	ALS Representative	Non-Voting	3/31/2022	CXL	P	P	P	A	P
20	James Neary	At Large NYS Certified (Seat 2)	Non-Voting	3/31/2021	CXL	A	A	A	A	A
21	Benjamin Sensenbach	Regional Patient Safety / QA Coordinator	Non-Voting / Ex Officio	N/A	CXL	P	P	P	P	P
22	Eric Thomas	BLS Representative	Non-Voting	3/31/2021	CXL	A	P	A	P	A
23	Vacant	Hospital Representative	Non-Voting		CXL	VACANT	VACANT	VACANT	VACANT	VACANT

**LEGEND:                      Present = P                      Excused Absents = E                      Unexcused Absents = A**

**Roll Call Attendance – Ben Sensenbach****Agenda Review – Erik Rueckmann, MD**

- Additions to the agenda

**State Actions – Ben Sensenbach**

- Christopher Foy
  - Certification suspended for one year effective 12/18/20. The suspension is stayed pending no further violations for three years.
  - Assessed a civil penalty of \$2,000.
  - For violations of 10NYCRR Part 800.15(a)(1) & (2) and 800.3(ap)(2)
    - Every person certified at any level pursuant to this Part or Article 30 of the Public Health Law shall: comply with prehospital practice standards, applicable for the geographic region of the State in which the individual is practicing, as established by: State-approved training curricula and State-approved training standards, in accordance with section 800.202 of this Part; State-approved protocols developed by State and/or Regional Medical Advisory Committees pursuant to sections 3002-a and 3004-a of the Public Health Law..
    - Patient abuse means any inappropriate and/or offensive physical, sexual or verbal contact or interaction with a patient, irrespective of whether the certificate holder is specifically acting in his/her capacity as an EMT when (s)he engages in the abuse, including but not limited to the following: Psychological abuse means verbal or non-verbal conduct by a certificate holder, directed to a patient, which insults, denigrates, humiliates, shocks, mocks, threatens, harasses, or alarms the patient. Psychological abuse shall not include verbal or non-verbal conduct which has a medical or therapeutic purpose or justification...
- Newark Arcadia Volunteer Ambulance, Inc.
  - Certification has been suspended for one year effective 12/22/20. The suspension is stayed pending a full service inspection and no further violations for three years.
  - Assessed a civil penalty of \$5,000.
  - For violations of 10NYCRR Part 800.21(b), (g), 800.23(a), (d), (e), (f), 800.5(d)(3), 800.24(c)(4)(ii), (c)(4)(iii), (e)(1-6), 800.24(f)(15), (f)(4), (h)(11), (h)(5), (h)(7), (h)(8) and PHL A30 3012(1)(b).
    - “An ambulance service shall: withdraw from service any ambulance or emergency ambulance service vehicle which is not in compliance with requirements of this part, or not in compliance with requirements of the Department of Motor Vehicles. Any vehicle with holes (from rust, poor gaskets, etc) into the patient compartment must also be withdrawn from service”...”An ambulance service shall: equip any ambulance or emergency ambulance service vehicle placed in service with the minimum equipment set forth in this part...”
    - “All equipment shall be clean, sanitary, and operable”; “Insofar as practical, all equipment in every vehicle shall be secured to the vehicle whenever the vehicle is in motion”; All pressurized gas cylinders shall be secured and in compliance with Federal DOT hydrostatic test expiration dates”; If controlled substances, drugs or needles are carried, there shall be a securely locked cabinet in which these items are stored when not in use”
    - “An advanced life support system providing prehospital EMT-critical care and/or EMT-paramedic services must include the following: equipment and supplies to provide pre-hospital care and/or EMT-paramedic services...”
    - “All ambulances in a certified ambulance service shall be equipped with the following unless exempted pursuant to section 800.25: Immobilization equipment consisting of...two of each of the following size padded boards, with padding at least 3/8 inches thick:...3 feet by 3 inches or equivalent device, by 3 inches or equivalent device...”; “Emergency childbirth supplies in a kit, consisting of the following sterile supplies: disposable gloves,

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scissors or scalpel, umbilical clamps or tape, bulb syringe, drapes, and 1 individually wrapped sanitary napkin...”; “Miscellaneous an special equipment in clean and sanitary condition consisting of...two emesis containers...”; “Pediatric equipment consisting of:...one commercially prepared infant swaddler...sterile suction catheters, two each in sizes 6, 8 and 10 french...one sterile single use disposable oxygen humidification setup...child and infant size blood pressure cuffs with gauge(s)...”

- “...has not been competent in the operation of the service or has shown inability to provide adequate ambulance services or advanced life support first response service...”
- **Firuz Barotov**
  - Certification has been surrendered effective 1/17/21.
  - For violations of 10NYCRR Part 800.16(a)(10)
    - “...Has misappropriated any money or any property from any source during the course of any EMS duty and/or practice, irrespective of whether such misappropriation is prosecuted as a crime...”
- **Citywide Mobile Response Corp**
  - Assessed a civil penalty of \$25,000. Of that \$12,500 is suspending pending completion of a two year period of improved performance effective 1/22/21.
  - Engage a consultant from the NYC REMSCO to assist the agency with Part 800 and Article 30 compliance.
  - Submit a Plan of Correction within 30 days of 1/22/21.
  - Submit a current DOH 1811 within 30 days of the Plan of Correction.
  - Vehicle fleet is limited to the number in service as of 8/26/19. Upon compliance with the Plan of Correction and improved inspections for six months the Department will accept certifications for additional vehicles.
  - For violations of Article 30 Sec 3012(1)(b), and 10 NYCRR Part 800, 800.21, 800.3, 800.24, 800.23
    - “...Any ambulance service or advanced life support first response service certificate issued pursuant to section three thousand five of this article may be revoked, suspended, limited or annulled by the department upon proof that the operator or certificate holder or one or more enrolled members or one or more persons in his employ...has not been competent in the operation of the service or has shown inability to provide adequate ambulance services or advanced life support first response service...”
- **South Farmingdale Fire Department**
  - Suspended for one year effective 1/19/21. The suspension is stayed pending no further violations for a period of three years.
  - Assessed a civil penalty of \$2,000.
  - For violations of Article 30 Sec 3012(1)(b), and 10 NYCRR Part 800.23(a)
    - “...Any ambulance service or advanced life support first response service certificate issued pursuant to section three thousand five of this article may be revoked, suspended, limited or annulled by the department upon proof that the operator or certificate holder or one or more enrolled members or one or more persons in his employ...has not been competent in the operation of the service or has shown inability to provide adequate ambulance services or advanced life support first response service...”
    - “All equipment shall be clean, sanitary and operable.”

### Old Business – Ben Sensenbach

- None

### New Business & Medical Director's Report – Jeremy Cushman, MD

- COVID Update
  - Just about all of our first responders have had both vaccinations now. Thank you to our County Coordinators Tim & Karen for all of your help with this initiative.
  - COVID protocols have not changed.
  - A number of changes to the State Protocols are with the Commissioner's office to review, however our local treatment protocols remain the same.
- Performance Improvement
  - Paramedic Administration of Ketamine as an analgesic is available on Cypherworx.
  - Medication Cross Check Project – coming to you in the near future.
- RSI Credentialing is continuing, simulation examinations are scheduled for next month.
- State has new PCR guidelines. Most agencies are all set. Our office have reached out to those agencies that will be effected.
- An advisory was sent out regarding Communication with the Deaf Flip Books. The Council received an anonymous donation of \$1,000 and we received additional funding from Dr. Jason Rotoli at the University of Rochester to have more of these printed. If your agency needs some, please reach out to our office. We are also looking into having these available in ED Triage.
- SIREN – looking at doing EPIC TBI II trial. In the past trial, there was profound improvements in mortality for patients with traumatic brain injuries with simple changes. If all agencies are interested, we are only able to submit call volume data from six different agencies, so we will be sure to choose the agencies that most appropriately represent our community's diversity. This is very preliminary, it will be brought forward to the REMAC as things move forward as they would be the oversight body.
- Credentialing of Paramedic Providers Policy – Vote
  - Discussion on language: "The Agency should maintain a policy or written expectations outlining any performance and/or competency expectations of Paramedic skill performance while practicing at the Agency."
  - Physicians and non physicians were included in the TAG that reviewed and edited this document.
  - Motion by Tony Katsetos to approve the Credentialing of Paramedic Providers Policy as submitted. Seconded by Maia Dorsett. Any further discussion? No. No abstentions. No opposed. Motion Passes.
- Prehospital ECLS Shock Algorithm
  - The biggest change in this document is that RGH has indicated the ability to provide the ECMO and is comfortable with this protocol. The idea was to accept this and it will not be implemented until we have both hospitals agree that they are ready to go.
  - Motion by Maia Dorsett to approve the Management of Patients in Persistent VF/VT Policy as submitted. Seconded by Connie Verneti. Discussion: Is there any criteria of which patients in refractory VF can be eligible for this? Other areas had age criteria, mechanical CPR, etc. No, we intentionally kept this broad. Just because the patient is referred, doesn't mean they necessarily get it. On the algorithm it mentioned SMH RGH Monday – Friday 8a-4p. Does that mean it's not available outside of this window? That is correct, outside of this window, consider usual care. At the two facilities they cannot guarantee the ability to cannulate outside of the window. No abstentions. No opposed. Motion Passes.
- Policy – Care of the Mentally Ill or Emotionally Distressed Person
- Policy - Care and Restraint of Agitated or Combative Patients
- Care Bundle – Care of the Agitated or Combative Person
- Care Bundle – Care of the Mentally Ill or Emotionally Distressed Person

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- We used to have a singular policy, however these are really two separate issues and as such, the TAGs have separated this into two different policies and created bundles to go along with them. These two policies would effectively would replace that one policy. I present all four for approval.
- Motion to approve the Care of the Mentally Ill or Emotionally Distressed Person Policy & Care Bundle as well as the Care of the Agitated or Combative Person Policy and Care Bundle by Bob Breese. Seconded by Mark Philippy. Further discussion? No. No opposed, no abstentions. Motion Passes.
- Ed Erbland, the Training & Ed Chair is helping to coordinate training related to these policies. It will be a several month process. Anyone that is aware of resources or want to participate, let Ed or Mindy know.
- Course Sponsorship Conversation (Bruce Caveretta – Guest)
  - Current EMT critical decision making, hands on and team work have really suffered with COVID. We are working on ideas on how to overcome these issues. Looking for more scenario based training and testing process. This will be brought to Training & Ed and then we will circle back with REMAC after that.

### Program Agency & Patient Safety Report – Ben Sensenbach

- We are close to having our Program Agency contract finalized at the State.
- Concerns have been brought to the Patient Safety Committee regarding OB Triage/ED/EMS. We are putting together some uniform information to relay to EMS similar to the hospital capability document.
- We will have more information to bring to the group regarding intubations at the next REMAC.
- Medication Cross Check Project
  - Videos have been made and we are working through the content. This will be in Cypherworx. There was also a physician statement recently released by NAEMSP regarding Pediatric Medication Safety that we will be incorporating as well.

### Council (MLREMS) & State Council Meetings – Mark Philippy

- Regional efforts in mental Health in our community are ongoing
- CON matter to be voted on in November – Monroe Medi-Trans has a change in their operations.

### State Council Meetings – Mark Philippy / Jeremy Cushman, MD

- The State Council
  - Hoping to meet in May.
  - The State subcommittees and TAGs are ramping up again, more to come.
  - The CME Matrix and Part 800 changes are still waiting for Commissioner approval.
- Regional Council
  - We were able to get the 80/20 reimbursement issue resolved – thank you to the Program Agency for your assistance.
  - Council Officer elections are in March.
  - There may be changes in the Program Agency funding in the future (this was discussed pre-COVID), we will circle back and brainstorm ideas moving forward.

**Regional Trauma Advisory Committee –Ben Sensenbach**

- Next meeting is in March

**Individual Hospital Reports**

**Rochester Regional**

**RGH – Eran Muto, DO**

- No report

**Unity/St. Mary's – Tony Katsetos, DO**

- Pre-hospital Stroke Notification - need to streamline and get everyone on the same page. Dr. Katsetos to reach out to Drs. Rueckmann and Cushman to coordinate all of the stroke folks in both systems and come up with a plan moving forward.

**UR Medicine**

**SMH/Strong West – Erik Rueckmann, MD**

- No report

**Highland – Timothy Lum, MD**

- Dr. Rueckmann – we would like to take a moment on behalf of the REMAC, thank you Dr. Lum for over a decade of service. He is stepping down from the REMAC as his responsibilities at Highland continue to increase. The seat will be transitioned to Dr. Jay Schueckler

**Noyes – Aaron Farney, MD**

- No Report

**Motion to adjourn: Mike Bove, Seconded by Mark Philippy**

**A survey will be sent out on whether to continue these meetings via zoom or in person. The next Meeting is April 19, 2021 Location TBD.**

**Link for full meeting video:**

<https://youtu.be/le1MaMkUzfg>