NH EMS MEDICAL CONTROL BOARD

Division of Fire Standards and Training & Emergency Medical Services Richard M. Flynn Fire Academy, 98 Smokey Bear Blvd. Concord, NH 03305

MINUTES OF MEETING (Approved) January 19, 2017

Members present:	James Suozzi-Chair; Kenneth Call, Frank Hubbell, Joshua Morrison, Joey Scollan, Brian Sweeney, Thomas Trimarco, and Harry Wallus (8)
Members pending:	Patrick Lee (replacing Michelle Nathan)
Members absent:	Trevor Eide, David Hirsch, and John Seidner (3)
Bureau staff:	Chief Nick Mercuri, EMS Deputy Chief John Bouffard, Captains Vicki Blanchard and Chip Cooper, and Administrative Assistant, June Connor (5)
Guests:	Pamela Drewniak, Eric Jaeger, Jeanne Erickson, Steve Erickson, Michael Flynn, Christopher Gamache, MaryEllen Gourdeau, Stephanie Locke, Tim Monahan, Todd Robinson, Grant Turpin, Jared Whalen, and Craig Clough (13)
Guest Speakers:	Louis Chatel and Josh Patrick

I. Welcome

The meeting was called to order at 9:00AM. A quorum was present with 8 members present when the meeting began.

A. Introductions / Disclosures / Membership

- Some members have not yet submitted their RSA 15-A forms.
- Dr. Scollan's Region II nomination letter arrived during the meeting, and the MCB members took a vote to ratify her membership.
- Dr. Seefeld no update
- Dr. Freese (from Frisbee) introduction Dr. Freese was not present; no nomination letter received as of this date.

II. Approval of the September 1, 2016 and November 17, 2016 Minutes:

Motion made by Kenneth Call; seconded by Harry Wallus – to approve the minutes from both the September 1st and November 17th MCB meetings; passed unanimously.

III. Division/Committee Reports

- A. Bureau of EMS and Division Updates EMS Deputy Chief J. Bouffard
 - EMS in the Warm Zone Operations on track to be out mid-March.
 - Infection control memorandum back at DHHS.
 - This year's AFG money bought a simulation Trauma Hal, a power stretcher, and a cardiac monitor. The new ambulance, bought with last year's grant money, has been delivered.
 - Operations: licensing season!
 - Background check federal legislation for new and lapsed providers went into effect on January 1, 2017. State Police background checks, being done by individual services, are not a substitute.
 Spread the word...DO NOT GO PAST THE APRIL 30TH
 DEADLINE! Changing certification levels waiting for legal input on this as to whether or not it requires a background check; it does not at this point.
 - "LEAN" process This efficiency process is being done for the Division's course authorization, practical exam, and course completion processes. The current system will be analyzed and then streamlined into a more efficient way to doing business.
 - EMS Week May 21-27. The theme is "EMS Strong, Always in Service".
 - Ambulance inspections Diane Bunnell is the contact person.
 - Clinical Systems Section working on protocols. This year, the scope of practice modules will be slimmed down to their required content and included in the protocol roll-out. This guarantees that every 2 years, everyone will get the expanded scope of practice education.
 - New London DHART Conference April 29 & 30, 2017
 - Stroke Collaborative tentatively set for June 8, 2017
 - Brain Injury Association Conference May 17, 2017 (Vicki Blanchard and Dr. Lukovits will be speaking about EMS protocols)

- New England Guideline for Sepsis Jim Suozzi and Vicki Blanchard are working on this.
- Simulation Coordinator a conditional offer has been made for this position.
- Chip's Data Group
 - * Aaron McIntire has joined the group part time. The group is now completing the third party vendor information so they can submit compliant data to us.
 - * "Todd's RODS" <u>Revised OverDosed Score</u> based on the high and low readings for both the respiratory rate and GCS.
 - In 2016 there were 2,793 Narcan administration cases:
 - Of those, there were 1,222 with no improvement; 321 with some improvement; and 1,162 (42%) were considered to be "life saved".
 - Overall, since 2012, 41% were considered to be life saved.
- Elite program The TEMSIS and Trauma Registry User Management process has diverted, resulting in an RFP for the entire program.
- Chip Cooper and Jim Suozzi will be attending the NASEMSO National EMS Model Guidelines working group this coming weekend.
- Data analyst interviews one candidate has been moved to a second interview.
- A part time person is still needed in the Data Group; this person should know TEMSIS and be skilled in Excel.
- Data sharing working on how to share data with the CARES registry.

B. Coordinating Board Update – Frank Hubbell

- The CB will meet this afternoon, January 19, 2017 at 1PM.
- The most recent CB meeting was the joint Strategy & Planning meeting held on November 17, 2016.
- Here is the link to the minutes from the CB meetings: http://www.nh.gov/safety/divisions/fstems/ems/boards/coordinating/cbminutes.html

C. Trauma Medical Review Committee – K. Call

- The TMRC meeting was held on December 21, 2016.
- Highlights of that meeting included the following:

- * The Hospital Designation sub-committee is looking for people interested in being reviewers. There will be a workshop on February 1st.
- * 5 hospitals are on the docket for reviews in 2017.
- * The Education sub-committee, which plans the annual trauma conference, has 2 new co-chairs, and Karen Louis, from the Bureau of EMS, will join the committee.
- * The Pre-Hospital sub-committee will be shifting their focus from trauma triage to provider education.
- * Please refer to the minutes for the Injury Prevention and Rehabilitation reports.
- * Dr. Eric Martin will head up the new Process Improvement Sub-Committee. Chief Nick Mercuri will be working with this group.
- The TMRC will meet again on February 15, 2017 at 9:30AM.
- Here is the link to the minutes from the TMRC meetings: <u>http://www.nh.gov/safety/divisions/fstems/ems/boards/traumamedicalreview/trauma_minutes.html</u>

D. Drug Diversion – R. O'Brien for Jeffrey Stewart

- After more than 2 ½ years of work, the 7th version of the Best Practice Guide Book for Drug Diversion will be going in front of the Coordinating Board for review and adoption this afternoon, January 19, 2017.
- The next step for the Drug Diversion committee will be to work with the BEMS to get a training program developed for both the provider and UCDC levels.

IV. Septic Protocol speaker – Josh Patrick

Mr. Patrick gave a PowerPoint presentation on this subject, focusing on how EMS sepsis care can be improved. (See attachment)

Motion made (Trimarco/Hubbell) - to send the EMS sepsis issue to the Protocol Sub-Committee to be turned into a draft; **passed unanimously.**

V. Protocol Committee – (J. Suozzi / V. Blanchard) (see attachments for informational articles and draft copies)

Report below provided by Vicki Blanchard: <u>In General:</u> For oxygen saturation changed from > 94% to 94 – 99%.

<u>Thoracic Injuries</u>: A pediatric section was added under Paramedic for needle decompression.

<u>CPAP</u>: PEEP range changed from 5 - 10 cmH20 to 5 - 15 cmH20. A new section regarding using a BVM with PEEP in the absence of a CPAP device was added.

Refusal of Care: No changes.

<u>Baby Safe Haven</u>: New protocol outlining our legal obligation if a newborn is left at a fire station or ambulance station.

<u>Abdominal Pain</u>: The assessment box removed and some of its content moved into PEARLS.

<u>Adrenal Insufficiency</u>: hydrocortisone dose in extended care changed from 100 mg to 50 mg.

<u>Anaphylaxis/Allergic Reaction Adult & Pediatric</u>: Change AEMT epinephrine repeat administration from every 5 minutes (3 doses total) to Repeat every 5 minutes until sings and symptoms resolve.

<u>Anaphylaxis/Allergic Reaction – Pediatric:</u> Removed the weight based doses of epinephrine and made them consistent with the EpiPen.

Asthma, COPD, RAD: No changes.

<u>Asthma, Bronchiolitis, Croup:</u> Changed to "Pediatric Respiratory Distress" with Asthma, Bronchiolitis and Croup after the title. New bullets in PEARLS stating you can give IV solution of dexamethasone by mouth and addition bullets on pneumonia and age based ranges of tachypnea.

<u>BRUE (formally known as ALTE)</u>: Expanded on the definition and history taking needed as well the importance of transporting these infants.

Behavioral Emergencies: No changes.

<u>Fever Protocols</u>: Removed. Every board member agreed that you do not need to treat a fever, as it is a natural defense of the immune system. Additionally, it was discussed that some providers are being distracted by the fever and not identifying underlying sepsis.

Hyperglycemia: No change.

Hypoglycemia: Removed Glucapen as they will not be available for a number of years.

<u>Hypoglycemia</u>: changed the dose of D10 from just infusing until the patient's mental status returned. Changed pediatric dose to 5 mL/kg, with repeats every 5 minutes.

<u>Hyperthermia</u>: Added an indication and contraindication box at the beginning to make it clear this was a protocol for elevated temperature due to environmental exposure, over exertion, pharmacological agents or excited/agitated delirium and NOT fever associated with infectious illness.

<u>Hypothermia</u>: Added the consideration of the heat reflective emergency blanket (space blanket).

<u>Victims of Violence</u>: New protocol which combined Abuse & Neglect with Domestic Violence and added sexual assault. Louis Chatel from Monadnock Community Hospital presented a policy used by their hospital for early warning of domestic violence to their security force. EMS uses the code word "Code 61" which activates a system where victim advocates are notified even before EMS gets to the hospital. This protocol was sent back to committee to look further at added some early activation language.

Motion (Hubbell/Scollan) – *to remove the fever protocol*: 5 in favor and 3 abstentions from Wallus, Trimarco, and Call; **motion passed**.

Motion (Hubbell/Trimarco) – *to approve all protocols except for Violence*; **passed unanimously.**

VI. Old Business

A. Cardiac Arrest / CARES update – J. Suozzi / V. Blanchard

- Dartmouth Institute has a cardiovascular epidemiologist group that has agreed to fund a quarter of an FTE to help hire a state coordinator for CARES.
- Pilot sites Cheshire catchment area, Concord Fire, and AMR Manchester

B. Operational Medical Director – J. Suozzi / N. Mercuri

• The Coordinating Board will be looking into this.

C. EpiPens – J. Suozzi

• Already discussed.

D. MRH Credentialing (This should be placed high on the agenda for the next meeting in March.)

• A discussion ensued about the role of the MRH director in credentialing EMS providers. The group decided to continue the discussion at the next meeting.

VII. New Business

• Nick Mercuri explained Governor Sununu's requirement that all rule sets be analyzed within the next 90 days (due March 31st). **He asked** that everyone go back to their constituents and gather input about what is not efficient and what is not working. An email will be sent out tomorrow, January 20, 2017.

- VIII. Topics ad libitum None
 - IX. Adjournment Motion made (Hubbell/Trimarco) – to adjourn the MCB meeting at 12:05PM; passed unanimously.

Next meeting: March 16, 2017

Respectfully submitted,

James Suozzi, DO, Chairperson

Prepared by June Connor, Administrative Assistant I, Office of the Director, NHFSTEMS