PREHOSPITAL ADVISORY COMMITTEE (PAC)

MINUTES

June 6, 2016

David Ghilarducci, Cortney McPhee, Julia Fields, Brian Stevens, Marc Yellin, Paul Angelo, Suzan Rowan, Sterling Lewis, Brad Cramer, Michael Baulch, Brenda Brenner

Minutes not discussed

ANNOUNCEMENTS

- Dave announced that Brenda Brenner had been selected as the new EMS Administrator.
- Dave announced that Dr. Lisa Hernandez, Public Health Officer, has submitted her resignation.
- General group discussion regarding group concerns about the EMS Office being understaffed or spread too thin, with the Administrator responsibilities being spread to multiple programs, especially in light of the RFP undertaking. It was noted that the QA reps from AMR and EMSIA were doing tasks that should be done by the LEMSA, and that the hospital’s had some involvement in tasks that should be done by the LEMSA.

NEW BUSINESS

A. End of Life Options Act (“Physician Assisted Suicide”): Discussion regarding the possibility of EMS responders encountering a situation where family would provide direction in conflict with the patient’s wishes and how to approach this. EMS is currently waiting for guidance from the State for response. In the meantime, responders are being asked to contact the Base Hospital for direction while trying to honor the wishes of the patient. Dave indicated he will send information out to the group.

B. Public Health/EMS Agency Changes: Covered in Announcements
C. PAC Charter/Meeting Reorganization: A desire to combine the EMCC and PAC meetings onto one day per month was discussed. Additionally, splitting the PAC meeting into a regular business time block and a QA discussion time block was suggested. The group agreed to consider the 3rd or 4th Monday of every month, pending discussion at the EMCC on 6/8/16. EMCC would take place at 0830-1000, PAC/QA would take place from 1000 or 1030-noon.

D. New PAC Meeting Schedule: discussed in item C above.

OLD BUSINESS

A. Image Trend: Moving to new data set, more data fields will be required, there will be a tablet interface in addition to PC. The new system is expected to have patient charting started on scene by the first responder on scene, then pushed to AMR for them to finish the patient record. There will only be one PCR per patient instead of the current two, which will help make data gathering better and more accurate, and reduced duplication of effort between Fire and AMR. The hospitals requested consideration for continuing with TOC documentation until this could be reliably automated. Next meeting will review the TOC already in place in Image Trend.

REPORTS

A. Dave advised that he is continuing to review data relating to the 7 priority areas, but this is difficult to run due to having two PCRs per call.
B. AMR is recreating the Cardiac Arrest audit, this time for 2014-2015. They will provide a preliminary report at the August PAC.
C. Brad, Scott and Dave met to conduct strategic planning.
D. AMR is rolling out video laryngoscopy throughout June 2016.
E. SCPD/Narcan use and training: development of this program is continuing with Lt. Barry leading.
F. Public Health Alert regarding wound botulism discussion

ROUNDTABLE

DH/Paul Angelo: ED construction is going well and is resulting in synergies in the changes being made that may be felt longer term. Group discussion regarding desire to identify an engineering solution for limiting the amount of fluid that could be infused in pediatric patients. Brad and Scott to work on solutions.

Michael Baulch/Lifeflight: Lifeflight and CalStar are working together to rebuild the IFR capability of the DH helipad (flight-type terminology may be inexact in this report). This effort will take quite a bit of time, and require FAA approvals. They anticipate at least one year, but it will improve the flight paths overall.
Suzan Rowan, Watsonville Hospital: They are working on an ED remodel, and expect to increase bed capacity to at least 20. They are currently collaborating with Kaiser to expand services and specialties within the hospital and to accept patients.

Marc Yellin: Marc is now the EMSIA Medical Director.

AMR – AMR is now sharing the Medical Director with the EMSIA. Chris Jones is now the official Operations Manager for AMR. They are recruiting for a new Field Supervisor.

Everyone: Need to update the email group receiving PAC agendas. Brenda will work on this.

Next agenda – TOC demo from Image Trend (Paul Angelo), preliminary cardiac arrest audit (Brad)

**Next meeting is tentatively scheduled for August 1, 2016, however this could change pending change discussion with EMCC. Location TBD.**