



MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM

DIVISION OF COMMUNITY HEALTH

EDUCATION COMMITTEE

March 26, 2015 – 9:00 A.M.

MEMBERS PRESENT

Frank Simone, Chairman, NLVFD
Chief Chuck Gebhart, Boulder City Fire
Steve Johnson, MedicWest Ambulance
Brandie Green, CSN
Clement Strumillo, Community Ambulance
Don Abshier, CCFD

August Corrales, JTM
Donna Miller, RN, Life Guard Int'l
Derek Cox, LVFR
Syd Selitzky, Henderson Fire (Alt.)
Chad Fitzhugh, Mercy Air

MEMBERS ABSENT

Chief Scott Vivier, HFD

Steven Carter, AMR

SNHD STAFF PRESENT

John Hammond, EMSTS Supervisor
Judy Tabat, Recording Secretary

Gerry Julian, EMS Field Representative

PUBLIC ATTENDANCE

Mark Calabrese, CCFD
M. Monica Manig, HFD
David Slattery, MD, LVFR
Beau Mentley, HFD

Jim McAllister, LVMS
Dineen McSwain, UMC
Rachel Neubauer, UMC

CALL TO ORDER - NOTICE OF POSTING OF AGENDA

The Education Committee convened in Conference Room 2 at The Southern Nevada Health District on Thursday, March 26, 2015. Chairman Frank Simone called the meeting to order at 9:04 a.m. The Affidavit of Posting was noted in accordance with the Nevada Open Meeting Law. Chairman Simone noted that a quorum was present.

I. PUBLIC COMMENT

Public comment is a period devoted to comments by the general public on items listed on the Agenda. All comments are limited to five (5) minutes. Chairman Simone asked if anyone wished to address the Committee pertaining to items listed on the Agenda. Seeing no one, he closed the Public Comment portion of the meeting.

II. CONSENT AGENDA

Chairman Simone stated the Consent Agenda consisted of matters to be considered by the Education Committee that can be enacted by one motion. Any item may be discussed separately per Committee member request. Any exceptions to the Consent Agenda must be stated prior to approval.

Minutes Education Committee Meeting, January 7, 2015.

Chairman Simone asked for a motion to approve the minutes of the January 7, 2015 Education Committee meeting. Motion made by Member Corrales, seconded by Member Strumillo and carried unanimously.

III. REPORT/DISCUSSION/POSSIBLE ACTION

A. Discussion of Education Development for Psychiatric Patient Medical Screening Criteria

Dr. Slattery informed the Committee that he was not prepared to have a curriculum ready for this meeting but wanted to get some feedback on how they see this rolling out and what would be the most effective way of educating their providers. The criteria for screening individuals with acute mental illness for any acute injury or illness are essentially the message they want to teach and train on. There are medical conditions and traumatic conditions that can result in patients manifesting as a psychiatric emergency and the list that was developed by consensus with all the emergency department medical directors and then approved by the MAB, consists of those items and those screening criteria. This is a very important move in our evolution as an EMS system and he was highly confident that their providers in the field can make those decisions. He stated that the criteria are sound and wants to make sure that they have a quality educational offering. He added that he will continue to take the lead on this and anyone else who wants to be involved to let him know. He felt that the best way to make this message stick is to use cases, whether real or a made up. He stated that there are plenty in the EMS literature that they can use and then follow that up with a discussion of how this disease state manifests in a psychiatric condition and how best to screen for that in the field. It is important to make sure that this education component is as robust as possible to set up our providers for success.

Chairman Simone suggested that this should first go to the Drug/Device/Protocol (DDP) Committee to develop the protocol and a working outline. Once they have the framework of what is expected, then they can bring it back in a workshop environment where they can put in the details.

Mr. Cox agreed that it should be workshopped. He added that they need the outline and then in workshop they can put the objectives together.

Mr. Corrales felt that the case scenario portion is going to be instrumental in educating their providers.

Mr. Cox strongly urged that every agency should be represented whether they transport or not at the workshop.

Member Cox made a motion to form a Workgroup to work on the outline and objectives of the criteria for screening individuals with acute mental illness for any acute injury or illness. Seconded by Member Green and carried unanimously.

B. Discussion of Curriculum to Educate EMS Providers Relating to the Management of Prehospital Death

Chairman Simone reported that he's had a meeting with Jill Bernacki who is with the Trauma Intervention Program (TIP) of Southern Nevada and she provided some outlines on how to approach the notification of the family component. He added that there are (2) components to this; one is a clinical component which is more of a review of the death determination which is already in the protocols. The second component of this is having the expertise or having someone educate the providers how to work through the notification of the family. He informed the Committee that she provided him with an outline which he is still currently working through and as he gets more details he will bring it to this Committee.

Mr. Julian questioned if they were going to do a video versus Ms. Bernacki trying to do all the education.

Chairman Simone stated that initially Ms. Bernacki wanted to do the training herself. She was very passionate about doing the individual training for all the organizations. She is not in favor of videotaping at this time but I believe by presenting how many classes all of their organizations have to get education out they may be able to revisit that discussion.

Mr. Julian suggested that she could do the initial in person training with an EMS coordinator so at least there is somebody who did get that in person training that way when it is rolled out by video if there are any questions they can refer back to that EMS coordinator.

Chairman Simone agreed adding that having a primary educator for each agency take that initial training.

C. Update on Field Training Officer (FTO) Project

Chairman Simone referred to the Paramedic Mentorship/Internship Program packet and stated that an Education Workshop was held a couple of weeks ago and advised the Committee on the suggested changes:

Page 2: Manpower Requirements:

- changed “must” to “should”

Page 3: Paramedic Field Performance Evaluations:

Section A

- changed “Paramedic Field Performance Evaluation” to “Paramedic Event Evaluation”
- Changed “evaluated” to “designated an ALS level contact”.
- Added additional language to read: The Event Evaluation form should also be used for any patient contact where a detailed breakdown of the encounter is warranted. Such warranted encounters are when 3 or more prompts occur; there is a prompting on any Critical Factor area; and /or any exceptional performance”.
- housekeeping

Section B

- Added new section to read: A *Paramedic Daily Evaluation* must be completed for every shift listing all recordable patient contacts or scenarios. These records must be completed by an EMS instructor according to the evaluation factors and instructions for that particular phase of the mentorship/internship process.

Chairman Simone referred to the Event Evaluation form and stated that there was considerable discussion in the workshop pertaining to the layout of the form. He advised the Committee that in their handouts they have the previous version which was presented to the workgroup and also the revised Event Evaluation form which was based on the suggestions made at the workshop. He added that the content was not changed it was just reorganized.

- Housekeeping changes
- In Category box, changed “Scene” to “Patient Contact”

Ms. Selitzky voiced concern with students getting marked down in multiple categories for one prompt. Mr. Corrales stated that the intent was to educate the preceptors to one mistake one prompt as opposed to this one prompt applies to several areas.

Ms. Green stated that they took out the box on the Major Evaluation where it lists the education institute of the student and questioned if that was important to the Health District. Mr. Hammond stated would like to see the education institution name on the form because if there is a problem with the internship, the institution owns the student until the they get released and he would need to know who to talk to and it would be a lot easier if it is on the major evaluation form. Mr. Corrales stated that change was made in the last workshop; it just wasn't included in handouts. Ms. Green stated that the signature was added but not the name of the institution. Chairman Simone stated he will make that change.

Chairman Simone stated that during the video that was shown at the workshop, there were questions with regard to the prompts. Mr. Julian stated that the entire panel agreed on the number of prompts that would be considered a failure. Ms. Selitzky stated that it comes down to the documentation and that is what that comment section of the Event Evaluation is for.

Beau Mentley from Henderson Fire is precepting a student and has been using the forms to see how effective they are and reported his feedback as mostly positive. He felt the product was easy to use and kept him very organized especially on the educational component. He added there are just a couple of things that needed tweaking but beyond that the prompt component is pretty user friendly. He felt that temperature should be added to the “Physical Exam/Vital Signs” skills box. The Committee agreed.

Chairman Simone stated that when rolling out the education, they will be very general on the method of marking the Knowledge/Skills/Abilities section. He added that Mr. Mentley uses a slash system and they

can use that as an example. Chief Gebhart felt that they need to be consistent in their markings to avoid any confusion for the person reviewing the document. Mr. Corrales suggested they ask Mr. Mentley for his help when rolling this out to the preceptors so they can see his style and method.

Mr. Cox felt they need more sampling. He stated that the agencies need to go back and either ride with a crew so that they can implement this and truly see how it works then report back to this Committee.

Mr. Johnson stated that LVAPEC is turning out a class in mid April and Chairman Simone stated his agency may have 6 new hires coming on board.

Ms. Green suggested sampling on different types of interns besides students. Mr. Julian agreed with sampling the reciprocity applicant. Chairman Simone felt that the sampling of both student and reciprocity applicant will ultimately give 2 different results. The expectation is the reciprocity would be less prompts on the clinical component but procedurally there may be a little more prompting.

Chairman Simone referred to the Daily Evaluation forms in the handouts. He noted that they have the previous version and the revised version of the form. The revised version will give the preceptor more area to work to make specific notations and plans for improvements. He stated that he removed the "Satisfactory Incidents" and "Percentage" from the paper form.

Mr. Mentley stated that he found this form confusing and didn't use it adding that if he didn't have the event log there was nowhere to document the skills.

Mr. Cox reiterated by stating that traditionally on the daily you would put the treatment rendered for that call. When you are transcribing your event onto your daily evaluation, you're just giving the evaluation factors as just an overview and the person who is evaluating actually has to go back to the Event Evaluation form to find out what they did.

Chairman Simone questioned that if he added a blank line for comments under the 1 through 10 if that would make it more user friendly. Chief Gebhart answered in the affirmative.

Mr. Mentley stated that in his opinion, there should be an Event Evaluation on every transport. Ms. Green agreed stating that without having the events documented the students can't be failed.

Mr. Julian questioned how they evaluate a non-transport.

Chairman Simone stated that the term is defined as recordable event and questioned if the Committee needs to look back at the program. Mr. Cox felt that they define the Event Evaluation pretty well

Mr. Corrales added that the final piece is the paper trail which is important for the final evaluation. The FTO needs to go back to their original source document which will be the Event Evaluation form to justify their daily evaluations.

Chairman Simone asked the Committee if there were any other adjustments that need to be made to the Daily Evaluation form.

Mr. Corrales felt that the percentage needed to be added back into the Daily Evaluation. Chairman Simone stated that he can put the word percentage and then have some type of education to say how to calculate the percentage. Mr. Corrales stated it makes sense documentation wise and student feedback wise to have a percentage.

Chairman Simone stated that he will add that language. He noted that any changes he makes he will send to Mr. Julian to send to the whole group.

Mr. Cox stated that the paramedic intern will not be allowed to advance to Phase 2 of the process until all listed objectives are successfully completed and questioned what form is used to calculate that.

Ms. Selitzky stated that at Henderson Fire, they have a preceptor manual that they use to sign off the objectives and they can get signed off on an objective either by running the call and doing the skill or the objective, doing a scenario, giving a class or performing the skill.

Mr. Hammond stated that he understands there are differences in interning at a fire station versus interning at an ambulance service but felt there should be a standardized check out log and then the agencies can add their own additions specific to their agency. The beginning portion of it needs to be universal so that every student is treated in the same manner.

Mr. Corrales suggested that all the agencies submit at least one sheet of how they do their phase 1 and they can perhaps have an official Health District form that would be included in the packet. Consistent document that states they've completed phase 1 as recognized by the Health District.

Chairman Simone asked for motion to approve the changes as indicated:

1. Highlighted changes in the program
2. Adding Temperature to the Event Evaluation form
3. All changes discussed to the Event Evaluation form

Motion made by Member Strumillo, seconded by Member Gebhart and carried unanimously.

Member Cox made a motion that each agency submit within 2 weeks to the HD specifically Gerry an idea of some objectives for the end of the first phase orientation. Seconded by Member Corrales and carried unanimously.

IV. INFORMATIONAL ITEMS/ DISCUSSION ONLY

Mr. Cox informed the Committee that Las Vegas Fire & Rescue has rolled out a program called Resuscitation Quality Improvement where the providers do quarterly psychomotor skills activities to help them retain their CPR skills. He noted that people are still ventilating way to fast and they have been able to track it and document it very clearly. It's an interesting program and we hope to get some fruits of all of our labor on this program. We are one of the first in the country to roll it out and we can actually document the progressions.

V. PUBLIC COMMENT

Public comment is a period devoted to comments by the general public, if any, and discussions of those comments, about matters relevant to the Committee's jurisdiction will be held. No action may be taken upon a matter raised under this item of this Agenda until the matter itself has been specifically include on an agenda as an item upon which may be taken pursuant to NRS 241.020. All comments are limited to five (5) minutes. Chairman Simone asked if anyone wished to address the Committee. Seeing no one, he closed the Public Comment portion of the meeting.

VI. ADJOURNMENT

There being no further business to come before the Committee, a motion to adjourn was made by Member Cox; seconded by Member Corrales. Chairman Simone adjourned the meeting at 10:30 a.m.