

# **MINUTES**

# EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM DIVISION OF COMMUNITY HEALTH EDUCATION COMMITTEE

October 5, 2022 – 8:00 A.M.

# MEMBERS PRESENT

Chief Frank Simone, Chairman, NLVFD Braiden Green, CSN Nathan Root, HFD Matthew Dryden, LVFR Ryan Young, PIMA Susie Kochevar, RN, MVHPI James "Bud" Adams, AMR Chris Stachyra, CA Debra Dailey, EMSTC

## **MEMBERS ABSENT**

Chris Notaro, Mercy Air

Ryan Fraser, AirMed

## SNHD STAFF PRESENT

Christian Young, MD, EMSTS Med. Director

Laura Palmer, EMSTS Supervisor

Roni Mauro, EMSTS Field Representative

Rae Pettie, Recording Secretary

John Hammond, EMSTS Manager

Scott Wagner, EMSTS Field Representative

Nicole Charlton, EMSTS Program/Project Coordinator

## **PUBLIC ATTENDANCE**

Kat Fivelstad, MDSandra Horning, MDRae NiedfeldtScott PhillipsSpencer LewisRebecca CarmodyScott NielsenFernando JuarezMelanie RobisonPaul StepaniukTodd Ford

#### CALL TO ORDER - NOTICE OF POSTING OF AGENDA

Chairman Frank Simone called the meeting to order at 8:08 a.m. and stated the Affidavit of Posting was posted in accordance with the Nevada Open Meeting Law. All Committee members joined the meeting by teleconference and the roll call was administered by Laura Palmer, EMSTS Supervisor, who noted that a quorum was present.

#### I. FIRST PUBLIC COMMENT

Members of the public are allowed to speak on Action items after the Committee's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Committee on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Committee on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Committee on behalf of the group. Once the action item is closed, no additional public comment will be accepted. Chairman Simone asked if anyone wished to address the Board 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.

Approve Minutes for the Education Committee Meeting: August 3, 2022

Chairman Simone asked for a motion to approve the August 3, 2022 minutes of the Education Committee meeting. <u>A motion was made by Ms. Kochevar, seconded by Mr. Adams, and carried unanimously to approve the minutes as written.</u>

# III. REPORT/DISCUSSION/POSSIBLE ACTION

# A. <u>Discussion of Protocol Education Outline for Transport Destination Protocol</u>

Chief Simone referred the committee to the draft educational outline for the Transport Destination protocol and stated it consists of four sections: Review Changes; Emphasizing Points; Supporting Documents; and Overall Learning Objectives. Ms. Palmer stated the draft revisions to the Transport Destination protocol will give the agencies some flexibility based upon agency needs. Chief Simone noted that North Las Vegas Department has come up with a set of guidelines based on certain criteria to ensure patients are taken care of appropriately. Dr. Young stated that moving patient choice to the top of the list takes into consideration their needs, such as insurance and continuity of care constraints. The verbiage in Step 4 of the TFTC protocol transitioned from the mandatory "you shall" take this patient to a trauma center, to provider judgment. However, even with those exceptions the patient can still technically go wherever they want to go, so long as they're willing to accept the responsibility of a potentially bad outcome. But our responsibility is to do the right thing and use evidence-based practice to figure out what patient should be going to get the right care at the right time.

Chief Simone stated the overall learning objective puts an emphasis of recognizing a stable vs. unstable patient. Medically stable patients should be transported to their hospital of choice if the destination is not significantly beyond the response area of the transporting agency. If the patient does not have a preference, the patient should be transported to the nearest appropriate facility. Also, pediatric patients in compensated shock can have a normal appearance and normal work of breathing, appearing not to be ill. Pediatric shock may exist despite a normal blood pressure, and hypotension occurs late in pediatric shock syndrome. They should also be wary, as a child can decompensate quickly.

Mr. Hammond noted that patients that are put on an L2K are often overlooked. They should still be afforded their right to self-determination related to the choice of facility. Chief Simone stated there are also special circumstances. He used the example where a person who is visiting her daughter across town has a medical emergency and asks to be transported to a facility closer to home. The committee discussed the need to add another section titled "Special Considerations" and allow the individual agencies to expand the education component as needed.

Mr. Adams made a motion to accept the draft educational outline for the Transport Destination protocol, including the addition of a "Special Considerations" section, to be forwarded to the Medical Advisory Board for final approval. The motion was seconded by Mr. Green and carried unanimously.

## B. Discussion of Protocol Education Outline for Trauma Field Triage Criteria (TFTC) Protocol

Chief Simone referred the committee to the draft educational outline for the Trauma Field Triage Criteria protocol. Mr. Hammond explained that the revisions to the TFTC protocol still need to be presented to the Regional Trauma Advisory Board at their next meeting and subsequently forwarded to Dr. Leguen for approval. If revisions are made to the TFTC protocol, the educational outline may need to be further developed.

Mr. Dryden made a motion to accept the draft educational outline for the Trauma Field Triage Criteria protocol to be forwarded to the Medical Advisory Board for final approval. The motion was seconded by Ms. Dailey and carried unanimously.

# IV. INFORMATION ITEMS/DISCUSSION ONLY

Ms. Palmer reported the OEMSTS is working towards making changes to the continuing medical education hours related to recertification. The concept is to remove the current mandatory category hours to allow the agencies/training centers the flexibility to educate their EMS personnel in areas where they identify a need. The total hours required at each level of certification will remain unchanged, and they can continue to submit education for approval in the current category format. Mr. Hammond reminded them that all education needs to continue to be either approved by CAPCE or the OEMSTS. The committee was in favor of the change. Ms. Palmer stated the OEMSTS is currently working on revising the procedures, so the change will go into effect after the new EMS Procedure Manual is rolled out.

Ms. Palmer stated that the current times of the meetings are:

Education Committee – 8 a.m. QI Directors Committee – 9 a.m. Drug/Device/Protocol Committee – 10 a.m. Medical Advisory Board – 11 a.m.

She asked the committee if they would like to switch the meeting times for the QI Directors Committee meeting (a closed meeting) and the Education Committee meeting. The committee was amenable to the change. Ms. Palmer stated the December meetings will be changed.

Dr. Sandra Horning, pediatric emergency physician, stated a pediatric emergencies resource panel was developed by a group of people across their institutions who have an interest in pediatrics and pediatric emergency medicine. They are willing to provide continuing medical education for the training centers and EMS agencies, either virtually or in person. She stated she will leave her contact information with Ms. Palmer for those who are interested.

Dr. Horning noted she is the chair of the Emergency Medical Services for Children Committee for the State of Nevada. They are seeking two interested people to join the committee, one Fire/EMS representative, and one ambulance association representative. The committee meets quarterly for one hour in a virtual setting. She stated the committee would appreciate the participation and input of those who are interested.

Mr. Hammond introduced Nicole Charlton as the new EMSTS Program/Project Coordinator for the Office of EMS & Trauma System.

## V. SECOND PUBLIC COMMENT

Members of the public are allowed to speak on Action items after the Committee's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Committee on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Committee on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Committee on behalf of the group. Once the action item is closed, no additional public comment will be accepted. Chairman Simone asked if anyone wished to address the Board pertaining to items listed on the agenda. Seeing no one, he closed the Public Comment portion of the meeting.

# VI. ADJOURNMENT

There being no further business to come before the Committee, Chairman Simone adjourned the meeting at 8:50 a.m.