

MINUTES

EMERGENCY MEDICAL SERVICES

FACILITIES ADVISORY BOARD

July 6, 2005—8:30 A.M.

MEMBERS PRESENT

Karla Perez, Chairman, Spring Valley Hospital
Richard Henderson, M.D., MAB Chairman
Greg Boyer, Valley Hospital
Jonna Triggs, Southern NV Adult Mental Health Services
Lawrence Sands, D.O., Director CHS

Sam Kaufman, Desert Springs Hospital
Tony Marinello, North Vista Hospital
Steve Otto, Sunrise Hospital
Davette Shea, Southern Hills Hospital
Dan Musgrove, UMC

MEMBERS ABSENT

Rod Davis, St. Rose Dominican/Siena
Donald Kwalick, M.D., Chief Health Officer, CCHD
Tad Morley, MountainView Hospital
Renato Baciarelli, St. Rose Dominican/Rose de Lima

D. Blain Claypool, UMC
Alene Lewis, Southern Hills Hospital
Kim Crandell, Boulder City Hospital
Ingrid Whipple, Montevista

CCHD STAFF PRESENT

Joseph Heck, D.O., Operational Med. Director
Jim Osti, Grant Writer
Eddie Tajima, Administrative Asst.
Judy Tabat, Recording Secretary

Mary Ellen Britt, RN., QI Coordinator
Trish Beckwith, Field Representative
Jane Shunney, OPHP Manager

PUBLIC ATTENDANCE

Lawrence Pellegrini, D.O., LVFR
Trent Jenkins, CCFD
Russ Cameron, CCFD
Tim Wilcox, Sunrise Hospital
Gail Yedinak, UMC
Barry Calogero, Tefen

Don Hales, SWA
Mike Myers, LVFR
Doug Key, Roam IT
Joan McCraw, Mental Health Comm.
Virginia Deleon, St. Rose
Tim Ward, Tefen

I. CONSENT AGENDA

The Facilities Advisory Board convened in the Clemens Room of the Ravenholt Public Health Center on Wednesday, July 6, 2005. Chairman Karla Perez called the meeting to order at 8:35 a.m. and the Affidavit of Posting was noted in accordance with the Nevada Open Meeting Law. Ms. Perez noted that a quorum was present.

Minutes Facilities Advisory Board Meeting February 9, 2005

Chairman Perez asked for approval of the minutes of the February 9, 2005 meeting. A motion was made, seconded and passed to approve the minutes as written.

Ms. Perez opened the meeting by asking all members in attendance to introduce themselves since there were new faces on the committee. After introductions, Ms. Perez wanted to acknowledge Susie Cram who has retired from Sunrise Hospital for all her time and tremendous work she has done for the Facilities Advisory Board.

II. REPORT/DISCUSSION/POSSIBLE ACTION

A. Discussion of the future direction of the Facilities Advisory Board

Dr. Sands stated that the Health District has gone through a re-organization of the EMS structure with the new regulations that went into effect this past year and it was determined that the role of the Facilities Advisory Board was no longer appropriate under EMS. Dr. Sands asked for feedback on what direction this group would like to take the Facilities Advisory Board in the future. He also stated that in the past the FAB had focused on the relationship between the hospitals and the pre-hospital system but there are other issues that may need to be addressed or have a bigger vision of to maintain communication between the hospitals as well as the Health District.

Mary Ellen Britt added that the Facilities Advisory Board may need to be redefined and be dealt with on a larger level under Community Health Services.

Ms. Perez asked if the draft of the Community Healthcare Systems Advisory Board would still be a formal body and if notices would still be posted for a public meeting.

Dr. Sands advised that the Health District would continue to facilitate these meetings and post them as a public meeting but added the more important issue is to maintain communication between the hospitals and the Health District and make the best use of people's time.

Ms. Perez was concerned that if the FAB was eliminated this committee would no longer have the authority to make decisions that might impact the hospitals. Dr. Heck stated that both the FAB and the MAB are advisory boards to the Chief Health Officer, and everything that comes out of the meetings is a recommendation to the Chief Health Officer who has the ultimate authority. Dr. Sands added that the Health District took this group's recommendation as the consensus of this constituency when making decisions. Davette Shea made the comment that the FAB provided an avenue to communicate and negotiate on how patients are treated in this community and as a nurse how do they now continue to maintain a collaborative relationship as a whole through the hospitals, nursing and the Health District. Dr. Sands reiterated that we are not looking to dismiss the FAB but rather to redefine it to look at issues beyond just EMS.

Dr. Heck clarified that the revision came about from a restructuring within the Health District and the creation of the Community Health Services Division which encompasses EMS, Health Education, Epidemiology and Public Health Preparedness to fulfill the growing public health mandate. He also stated that there was a disconnect looking at what the FAB was tasked to do per EMS regulation versus what it has actually been doing over the last several years and that perhaps it is more appropriate to place it under the CHS Division.

Mr. Musgrove asked if this reconstituted board would have the ability to advise on all areas of the CHS Division. Dr. Sands stated that a lot of what the Health District does is public health and that cuts across every sector in the community, not just the hospitals alone, but many other healthcare providers. Ms. Perez asked if the composition of this advisory board would be broader than just the hospitals. Dr. Sands stated that the Health District partners with a lot of groups across the whole healthcare sector and this would make it well coordinated. Jane Shunney made the comment that the Office of Public Health Preparedness which is under the Community Health Services Division has a real need to partner with the

hospitals to prepare for and respond to events that could affect this community. Ms. Perez asked that everyone take the draft of the Community Healthcare Systems Advisory Board to review and bring it back for discussion.

B. Discussion of the proposed legislation SB458 regarding timely ambulance patient transfers to Hospitals.

Ms Perez stated that a copy of this bill was passed out and there is a section that states the Health Division shall adopt regulations concerning the manner in which time will be tracked and wanted to know if the Health Division is going to form a task force so all hospitals are using the same methods for tracking this data.

Dr. Heck responded that this study is mandatory for counties greater than 400,000 and optional for counties under that. So far no other County is interested in participating so the Health Division will most likely delegate the authority to conduct the study to the Health District. He also stated that he would like to get an ad hoc group smaller in size to meet and go over the technical aspects and decide on a methodology that everybody agrees with prior to the Health Division formally delegating this authority so we are not 4 or 5 months behind. Dr. Heck stated that the timeframe is October 1st and it expires in 2 years. Ms. Perez was also concerned with the verbiage in Section 2, 3c because it would be a bit onerous to have to collect that data on every patient who arrives by ambulance. Dr. Heck stated that it was the intent that it would be only for those that fell out of the 30 minute timeframe. Ms. Perez also suggested that the EMS system go to a two color system, green if you're under 30 minutes and black if you're exceeding it to help track and correlate with the actual data that's being recorded. Dr. Heck felt it was an excellent idea but the study itself will require much more detail data including patient time stamps that involve arrivals and acceptance. Mike Myers stated that he has come up with a couple of options; one is to change the EMS system and automate it to improve the trust factor. He is also working with a company called First Watch but Russ Cameron will be discussing a company called Roam IT that does Electronic Patient Care Reporting (ePCR). Mr. Cameron stated that we need to track every element of what is being done in the pre-hospital arena and this system would be free to the hospitals. He stated that a representative from Roam IT would give a presentation on some of the possibilities of technology. Ms. Perez recommended that the presentation be placed on the next agenda due to the time factor.

III. INFORMATIONAL ITEMS/DISCUSSION ONLY

A. Update on mental health legislation and issues.

Dr. Triggs passed out a synopsis of the budget highlights for Southern Nevada Adult Mental Health Services (SNAMHS) which outlined all approved programs and services. This legislation session allowed them to add an additional 350 people and their medication clinics will have substantial growth. Dr. Triggs stated that recruiting these people will be a challenge so State Personnel has set aside some additional funding to allow recruiting on the internet. They have also received a psychiatric residency which came out of a legislator's bill which will also help them recruit.

Dr. Triggs announced that the new 190 bed facility will open in stages, 150 beds will open in May of 2006 and then the additional 40 beds will open on July 1st of that same year. The 1300 building will remain in operations until the new Hospital opens and with the exception of 27 beds the rest will move over to the new facility. Assembly Bill 175 did pass which will provide beds for patients who have been medically cleared at Emergency Rooms and who are

waiting for a bed to open in the POU. Dr. Triggs made it clear that this is a post medical clearance place to put people who now wait 3 and 4 days in the emergency room and this will have a target opening date of October 1st. Dan Musgrove was concerned about this October 1st opening and has called the Governors office to see if they can speed up the RFP process before going into a crisis. Ms. Perez stated that Westcare who was ready and staffed for an August 1st opening of the Community Crisis Center is concerned if it gets delayed. Mr. Musgrove suggested that they put some emails together and direct them to the Chief of Staff or the Governor himself asking that he look into assisting an expedited RFP process to get this open as quickly as possible.

Ms. Perez asked Mr. Musgrove to give an overview of how the Senate and Assembly bills have affected the Community Triage Center. Mr. Musgrove responded that they put together a RFP for a Community Triage Center and have received one response back from Westcare. Westcare stated they will do it for just a slight increase over what they did it for last year. The RFP came back at 2.8 million dollars to do community triage going forward with transportation. Westcare has received beta funding of \$430,000.00 which would come off the top so the Hospitals, State and Local Government would each fund \$805,166.00.

Ms. Perez asked the board if everyone is still in agreement with the current methodology used for funding Westcare. She stated that there was some concern from the hospitals over the most appropriate method for distribution because past funding was based on the number of referrals each hospital has made to Westcare and there was some suggestion to do it by the number of beds in your ER or licensed beds. Mr. Musgrove suggested that it would be best to use last fiscal year which would be July to June as an actual historical number to base your hospitals budgeted amount. Ms. Perez added that in the legislation it said that the State will only pay their share if everybody else agrees to pay theirs and that this is an individual hospital decision but would certainly ask each hospital to give it very strong consideration. Mr. Musgrove will put together a communication that will let each hospital know based on the most current data what the expectation would be for the upcoming fiscal year by taking the existing MOU that is in place and changing the numbers and effective dates.

B. Discussion of a proposal for assisting with mental health issues.

Barry Calogero provided an introduction to Tefen which is an operations management consulting firm with experience in improving business process optimization and to provide them with the skills and tools to be effective. Mr. Calogero then turned the presentation over to Tim Ward who discussed the mental health situation in Clark County.

IV. PUBLIC APPEARANCE/CITIZEN PARTICIPATION

No response.

V. ADJOURNMENT

As there was no further business, Chairwoman Karla Perez called for a motion to adjourn. The motion was seconded and carried unanimously to adjourn at 10:13 a.m.