MINUTES
EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM
DIVISION OF COMMUNITY HEALTH
MEDICAL ADVISORY BOARD (MAB) MEETING
December 7, 2016 – 11:00 A.M.

MEMBERS PRESENT

Dale Carrison, DO, Chairman, Clark County Fire Dept.
Tony Greenway, American Medical Response
EP Homansky, MD, American Medical Response
Logan Sondrup, MD, Community Ambulance
K. Alexander Malone, MD, North Las Vegas Fire Dept.
Eric Anderson, MD, MedicWest Ambulance
Mike Barnum, MD, American Medical Response
Brian Anderson, Community Ambulance
Jim Kindel, Boulder City Fire Dept.
Melanie Ondik, Community Ambulance

Brian Rogers, Community Ambulance
Ketan Patel, MD, Boulder City Fire Dept.
Chief Lisa Price, North Las Vegas Fire Dept.
Troy Tuke, Clark County Fire Dept.
Kim Dokken, RN, RTAB Representative
Chief Kim Moore, Henderson Fire Dept.
Mark Calabrese, Clark County Fire Dept.
Chief Jon Stevenson II, Las Vegas Fire & Rescue
Frank Simone, North Las Vegas Fire (Alt)
Tressa Naik, MD, Vice Chair, HFD (via cell phone)

MEMBERS ABSENT

Paul Stepaniuk, MSO, Henderson Fire Dept
Jarrod Johnson, DO, Mesquite Fire & Rescue
Sean Dort, MD, RTAB Representative
Bryan Bledsoe, DO, MedicWest Ambulance

Chief Rick Resnick, Mesquite Fire & Rescue
David Slattery, MD, Las Vegas Fire & Rescue
Brandon Hunter, MedicWest Ambulance

SNHD STAFF PRESENT

Christian Young, MD, EMSTS Medical Director
Laura Palmer, EMSTS Supervisor
Heather Anderson-Fintak, Associate Attorney
Jay Boyer, Sr. Informatics Scientist
Lei Zhang, Public Health Informatics Scientist
Michelle Loel Stanton, Recording Secretary

Joseph Iser, MD, Chief Health Officer
Michael Johnson, Ph.D, Community Health Director
Gerald Julian, EMSTS Field Representative
Sony Varghese, Public Health Informatics Scientist
Prut Udomwattawee, PH Informatics Scientist I

PUBLIC ATTENDANCE

TJ Smith, HFD
Sam Scheller, GEMS
August Corrales, JTM
Dan Musgrove, VHS
Ryan Bezemer, CA
Steve Johnson, MWA
Doria Sondereker, Southern Hills Hospital
Jason Driggars, MWA
Kimberly Cerasoli, UMC

Jim McAllister, LVMS
Alexis Mussi, Southern Hills Hospital
Michelle Spott, Southern Hills Hospital
Daniel Llamas, HCA
Mark Wilton, AMR
Damon Schilling, AMR/MWA
Kathy Millniser, Southern Hills Hospital
Dineen McSwain, UMC
CALL TO ORDER - NOTICE OF POSTING OF AGENDA

The Medical Advisory Board convened in the Red Rock Trails Conference Room at the Southern Nevada Health District on Wednesday, December 7, 2016. Chairman Dale Carrison called the meeting to order at 11:03 a.m. The Affidavit of Posting, Mailing of Agenda, and Public Notice of the Meeting Agenda were executed in accordance with the Nevada Open Meeting Law. Chairman Carrison 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 Carrison 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 Carrison stated the Consent Agenda consisted of matters to be considered by the Medical Advisory Board that can be enacted by one motion. Any item may be discussed separately per Board member request. Any exceptions to the Consent Agenda must be stated prior to approval.

 Approve Minutes/Medical Advisory Board Meeting: October 5, 2016

Chairman Carrison asked for a motion to approve the October 5, 2016 minutes of the Medical Advisory Board meeting. A motion was made by Jim Kindel, seconded by EP Homansky, and carried unanimously to approve the minutes as written.

III. CHIEF HEALTH OFFICE REPORT

Dr. Iser stated that as his schedule allows he will be attending meetings of the Medical Advisory Board and that the reason for mentioning this is because the legislative session will be starting soon and he will need to be available to attend as necessary.

Dr. Iser stated the audit for the last fiscal year is complete and came through very clean. The findings from the previous administration that had been of concern have now been taken care of. A special Board meeting is set for next week because the auditors could not get the audit done in time for it to be approved and move forward. Dr. Iser pointed out that the indirect funds are beginning to decrease. One reason for this is because of the Health District’s relocation to its current facility thereby eliminating approximately two-million dollars rent for the Valley View location and four-hundred thousand dollars rent for the Shadow Lane site.

Dr. Iser advised the Board of the passage by the Federal Legislature of the Zika funding that had been discussed previously. There have been meetings with both the County and cities to discuss plans for implementation of Zika funds. The State is allowing Southern Nevada Health District most of the funds that are coming their way, which have been applied for, we should have a decision in the next few weeks. There will be an additional meeting once the final notification is received. These funds should allow the Health District to fund a full vector program for the first time in many years. We have been covering those costs with our property tax dollars for many years. We will be asking the legislature to increase the property tax that we receive in order to continue our protection of Clark County and surrounding areas, such as Pahrump, where the State is unable to cover.

Dr. Iser said we are expecting Senator Woodhouse to enter her bill again which would assist in freeing up funding that could possibly used for EMS & Trauma programs. Dr. Iser stated that we are open to other suggestions, either by the legislature or Senator Spearman herself, for how to fund a state of the art EMS & Trauma system. The proposal brought forth two years ago was an additional tax of one dollar per homeowner and vehicle registration which would be prorated so that the money raised in Clark County goes to us and the money raised throughout the rest of the State would go to the State since Washoe County does not have its own EMS & Trauma system. We are also going to request that the Legislature reinstate funding for TB and STDs that was withdrawn two sessions ago. Currently 80% of the funding for those programs comes from local property tax dollars.

Dr. Carrison commented to the importance of funding for TB prevention as it affects the entire EMS system since they are often exposed without their knowledge.
IV. REPORT/DISCUSSION/POSSIBLE ACTION

A. Discussion of Nominations for Chairman / Vice-Chairman

Laura Palmer reminded the group that since Dr. Naik is currently serving as Vice-Chair she is automatically nominated for Chair. Nomination forms were sent to the members of the Board but only one reply was received and that was for an ineligible member who does not hold a main seat. That said, Dr. Naik is the only nominated member and we currently have no nominations for Vice-Chair. She also reminded the Board members that the main seated Medical Directors and Operations Directors are the only qualified candidates.

Dr. Carrison advised Dr. Naik that she has been nominated for chair and asked the Board for other nominations for Chair. A vote was taken with all members signifying their agreement with an aye vote, none were opposed and none abstained.

Dr. Malone reading from an email sent by Dr. Bledsoe; “Effective January 1st I will no longer be serving as Medical Director for MedicWest and will not be able to participate on the MAB.” Dr. Malone quoted Dr. Bledsoe’s email as a reminder that he is no longer eligible for nomination.

Dr. Homansky nominated Dr. Malone for vice-chair of the Medical Advisory Board. A vote was taken with all members signifying their agreement with an aye vote, none were opposed and none abstained.

Dr. Carrison in confirmation of the aforementioned votes stated that for the next two years (2017 and 2018) Chairman of the Board will be Dr. Tressa Naik and Vice-Chairman of the Board will be Dr. K. Alexander Malone.

Dr. Iser reminded the board that according to its bylaws Dr. Carrison is to immediately turnover the Chair position to Dr Naik. In her absence Dr. Malone will be leading the rest of the Medical Advisory Board meeting this day.

Dr. Carrison expressed his sincere gratitude to the Board as well as the staff of the Southern Nevada Health District stating that without them he could not have led the committee as effectively as he has for the last two years. He then turned the meeting over to Dr. Malone.

B. Committee Report: Drug/Device/protocol Committee (11/02/16)

1) Discussion of Alternate Receiving Facility Criteria for EMS

Laura Palmer reminded the board that this item had been referred to the Drug/Device/Protocol Committee for further review. She stated that the committee discussed the transport destination protocol at length and whether specific illnesses should be specifically stated as inappropriate to transport to the alternate receiving facilities. It was decided that this would be an incredibly lengthy process and therefore the following changes were decided upon. Telemetries will be mandatory for these patients; a provider can make a recommendation if it is the closest facility and meets the applicable standards; no violent or uncooperative patients can be seen there; no obstetrical patients over 20 weeks; and any patient that meets any other transport destination protocol. Ms Palmer noted the Board members have the final draft of the protocol for review and opened the floor for discussion.

Vice-Chairman Malone asked for a motion to accept the Transport Destination Criteria for Alternate Receiving Facilities. Motion made by EP Homansky and seconded by Brian Rogers, Dale Carrison abstained, and no members were opposed. The motion carried.

2) Discussion of Defining Successful Ventilatory Management in the Emergency Medical Care Protocols

Laura Palmer stated there has been some confusion about the differences in the protocols regarding inability to intubate, inability to successful oxygenate, and inability to adequately ventilate. This verbiage has been discussed with both the Drug/Device/Protocol Committee and the Education Committee and it was agreed upon that the phrase “inability to adequately ventilate” would eliminate any confusion as to the condition of the patient. Members from both committees agreed that the phrase “inability to adequately ventilate” would eliminate questions and the patient should be taken to the closest appropriate facility.
Vice-Chairman Malone asked for a motion to approve the general assessment and general pediatric assessment language to be changed to: inability to adequately ventilate. Motion made by EP Homansky and seconded by Brian Rogers and no members were opposed. The motion carried.

C. Committee Report: Education Committee (11/02/16)
   1) Discussion of Defining Successful Ventilatory Management in the Emergency Medical Care Protocols
      Same as discussed above
   2) Discussion of Incorporating the Monitored Instructor Hours as Part of the Instructor Course
      Frank Simone stated that this was presented at the October 5th meeting and that time it was decided that a workgroup would be formed to discuss these changes. The first meeting is scheduled for 9am at the North Las Vegas Administration Offices on December 12, 2016.
      Ms Palmer advised the board that anyone who would like to attend these meetings is welcome as input from the EMS agencies is needed.

D. Trauma Registry Presentation
   Jay Boyer, SNHD Informatics Supervisor, gave a presentation on the department’s trauma based web application, which will enable the non-trauma centers to enter their trauma data. He demonstrated how reports can be generated and filtered to meet the National Registry Criteria. Encryption features were added for security purposes, and the Informatics Department will continue to work on expanding the reporting capability. To address quality assurance, they have included a feedback loop that includes real-time validation. Mr. Boyer anticipates a February 2017 production date. They will continue to meet with the hospitals to address their concerns.

V. INFORMATIONAL ITEMS/DISCussion only
   Dr Young reported to the board that the transports of legal 2000 are increasing as they usually do over the holidays. He is going to attempt to reach out to the hospitals to ensure they are keeping the data dated in real time.
   Dr Carrison stated that load leveling does exist in the community. If a hospital advises a crew not to bring a legal 2000 to their facility it is to be reported to the Facility Advisory Board. The only time it is acceptable to deny one of these patients is if the hospital is on formal divert. Also, metro does not direct where mental patients are to be transported.
   Dr. Carrison reminded everyone that there is going to be an international mass gathering conference on February 10th and 11th 2017 at the Monte Carlo. He attended this conference last year in New York and highly recommends anyone who can attend to attend.
   Dr Iser said that although it is early in the flu season we have already seen a 20% increase in influenza cases. He would encourage everyone and their staff to get vaccinated.
   Dr. Malone stated that North Las Vegas Fire offered crews and their families vaccines the prior weekend and had a decent turnout.
   Dr. Malone thanked Dr. Carrison for the tremendous contributions he has made in the community in his distinctive roles as a law enforcement officer, tactical physician, air medical physician, medical director, and mentor. Dr. Iser, along with the rest of Board, echoed his sentiments.

VI. 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 Carrison asked if anyone wished to address the Board. Seeing no one, he closed the Public Comment portion of the meeting.
VII. ADJOURNMENT

There being no further business to come before the Board, Chairman Malone called for a motion to adjourn. A motion was made by Frank Simone, seconded by Troy Tuke, and carried unanimously to adjourn at 11:57 a.m.