

MEDICAL ADVISORY COMMITTEE

Minutes of the August 13, 2014 meeting held at St. Joseph Hospital.

Present:

Doug Boileau, EMT-P	Arcata-Mad River Ambulance
Karl Verick, RN	Briceland Fire Department
Paul Duncan, EMT-P	CAL-Fire
Jaison Chand, EMT-P	City Ambulance
Tim Howard, Sr. Medical OA	DHHS--Public Health
Donald Baird, MD	DHHS--Public Health
Angel Kellar, RN	Jerold Phelps Community Hospital
Angela Landry, RN	Jerold Phelps Community Hospital
Doug Pleatman, MD	Jerold Phelps Community Hospital
Jeffrey Young, MD	Jerold Phelps Community Hospital
Ken Stiver, MD	North Coast EMS
M.H. Moustafa, MD	St. Joseph Hospital

1. APPROVAL OF MINUTES

The minutes from the 07/09/14 meeting were approved.

2. OLD BUSINESS

Med Net System & MCI Channel Updates

Per Paul: There was an MCI channel test yesterday; only Mad River Hospital did not respond. No updates on the Med Net System. An MCI was not declared for the accident on Hwy 36 near Fortuna, so the MCI channel was not used.

Mental Health/EMS Update

No Mental Health representatives were present and NCEMS had nothing new to report.

North Coast Paramedic Program

Per Doug: The program is scheduled to start 08/23/14 at College of the Redwoods main campus on Fridays and Saturdays. Currently, there are only sixteen students signed up. Doug asked participants to encourage potential students to sign up for the program. All the students from the last program are in field internships. Last week the first student from that program finished her field internship, and four others are nearing completion.

Image Trend Update

Per Dr. Stiver and Jaison: Nothing new to report. Per Doug: Arcata Mad River Ambulance recently experienced two outages of Image Trend. The second outage was caused by an upgrade which overloaded the system's cache. Other than the outages, the program is working well.

Policy/Protocol Updates

Per Dr. Stiver and Jaison: Nothing new to report. Per Doug: Is the Fentanyl policy out for public comment yet? Jaison does not think it is out in draft form yet. The hospital representatives have not seen a draft policy either.

Hoopa Ambulance Update

Doug summarized the financial issues facing Hoopa Ambulance and their efforts to find new revenues and reimbursements. He discussed the county sales tax initiative that will be on November's ballot. Hoopa is hoping to receive a portion of the sales tax to help fund ambulance service. They have decided not to pursue creating a benefit assessment district for now pending the outcome of the initiative. If the initiative passes, Doug would like to see private ambulances be eligible for a portion of the sales tax to cover unreimbursed care, which they have not received from the county since 1985. The tribe received

\$140,000 in Medi-Cal reimbursement funds for the 2011-2012 fiscal year through a program that applies only to government and tribal-owned entities, and they are anticipating receiving a similar amount for last fiscal year. If Hoopa Ambulance receives such funding, this year they may break even. Per Karl: Is Hoopa's issue one of staffing the Willow Creek unit? Per Doug: Initially the tribe brought up the Willow Creek location as a financial problem, but maintaining the location itself only cost around \$30,000; most of the costs goes toward staffing a crew. Thus if Hoopa moved their second station elsewhere they would still have nearly the same deficit.

3. NEW BUSINESS

Accident on Hwy 36

On 08/10/14 there was a traffic accident on Highway 36 resulting in four fatalities and four others with major injuries. Per Jaison: The four deaths occurred at the scene; two ambulances from City Ambulance transported the survivors to Redwood Memorial Hospital. They received critical care while arrangements were made to transport them out of the county. At first there were three ambulances sent to the scene, but one canceled. Jaison conceded if the third ambulance had made it to the scene, one of the patients would probably have been transported to St. Joseph Hospital.

An MCI was not declared, thus the MCI channel was not used. Per Jaison: The incident clearly met the definition of an MCI. Since only one hospital and one ambulance company was involved, the incident probably went more smoothly not activating the MCI channel. However, he believes the MCI should have been declared. Per Karl: Were MCI procedures followed even though one was not declared? Per Jaison: No. An MCI needs to be declared in order for everyone to follow those procedures. Per Doug: What was the decision process for both ambulances to take all four critical patients to Redwood Memorial? Per Jaison: Due to the location of the accident, the ambulances would drive right by Redwood Memorial if they had taken patients to St. Joseph, which is twenty-five minutes away. Per Dr. Stiver: The procedure during an MCI is to take half the critical patients to the nearest hospital, and the rest disbursed, but in this case all the patients were also unstable, so all needed to go to the nearest hospital initially. Per Dr. Young: Did Redwood Memorial declare an MCI? Per Dr. Stiver: Even though they did not, Redwood Memorial acted as if there had been a declared MCI.

Per Dr. Baird: The incident went well because Redwood Memorial had an experienced ER doctor on staff, and a surgeon who was once a paramedic. Per Jaison, patients were transported from the scene about ten minutes after the second ambulance arrived. Dr. Stiver discussed the incident with staff at Redwood Memorial and believes they performed well. He believes there are issues that need to be addressed such as staff and resource shortages, out of area transportation times, and ensuring patients are stabilized. Per Dr. Baird: Another issue is St. Joseph declined to take any of the patients from Redwood because they had no neurosurgeon or orthopedic surgeon on call. Per Jaison: The transfer center contracted with St. Joseph was ineffective in setting up out of area transfer for the patients. Jaison made transfer arrangements for them himself. Per Doug: Local coordination for such incidents works better than using the center, and he would like MCI protocols to be revised so that the transfer center can be bypassed more easily in favor of local coordination. Per Jaison: There were weather problems that evening that further complicated transfer. Jaison believes if all the local hospitals were designated as level four trauma centers the transfer problems experienced in this and other incidents would not have happened.

Per Doug: Will anyone write an After Action Report (AAR) on this incident? Dr. Stiver will discuss this with NCEMS to coordinate with all those involved on creating an AAR.

4. NCEMS Report

Per Dr. Stiver: Aside from the points he raised in the previous conversation on the Highway 36 accident, nothing else to report. Per Doug: Arcata Ambulance received the orthopedic coverage schedule and explanation in July. Doug thought the letter implied they would start receiving a monthly

schedule, but he has not received one for August. Dr. Stiver did not know if there is a monthly schedule or how it is distributed.

5. EMS Commission Report

Per Jaison: Public safety regulations are scheduled for the 09/16/14 Commission meeting agenda. Kern County is appealing the State's EMS Authority rejection of the transportation portion of their plan. This is the first time a LEMSA has appealed such a decision to the EMS Commission. Kern is arguing that they do not need the state's approval and has cited Supreme Court precedents. The ruling could potentially have a huge impact because statewide there are over eighty Exclusive Operating Areas. This will be a complicated issue for the Commission to resolve.

6. Facility Reports

Jerold Phelps—Per Angel: They had an EDAP facility inspection, which went well. She expects a final report from NCEMS the first week of September. Jerold Phelps stayed busy during "Reggae on the River", but had no major issues. There were reports of rapes and sexual assaults during the festival, which brought about a discussion of what policies are in place for how a hospital is to handle such cases. Jerold Phelps does not have rape kits in their ER. The doctors all agreed that a forensic expert in rape should be the one to do rape exams, not hospital doctors. Per Karl: There is a county procedure through the Sexual Assault Response team to bring in experts to perform such examinations at a hospital.

Briceland Fire—Per Karl: They have appointed three interim fire chiefs to fill in for Tim Olsen. They are busy assisting on the fires in the region. They are now receiving property taxes from the newly created special district, which is helping them financially. Dr. Baird mentioned the Homeland Security grant which Briceland has received funds from in the past, and has provided funding this year for the technical rescue team which has some Briceland Fire members.

City Ambulance—Per Jaison: They are interviewing for both EMTs and paramedics; he has eleven interviews scheduled.

DHHS-Public Health—Per Dr. Baird: Public Health has received funding through Homeland Security to purchase a second machine for Polymerase Chain Reaction (PCR). PCRs are used to diagnose bioterrorist organisms as well as communicable diseases. Public Health has been conducting PCR testing throughout the pertussis epidemic, the influenza season, and on the recent measles case. Per Karl: Was PCR used for sero-typing during the e-coli mini-outbreak? Per Dr. Baird: No, that was done at the state level. Per Dr. Pleatman: How do hospitals get samples to Public Health? Per Dr. Baird: Contact the Public Health Lab ahead of time to make arrangements. The Lab can have results the same day. He will work with the hospitals to ensure they follow all the steps in preparing the samples for Public Health. Per Karl: Public Health has brought pertussis media from Eureka to the Southern Humboldt Community Clinic next to the hospital for storage. Per Dr. Baird: They should also have viral transport media. He will arrange with Debbie Scaife of Jerold Phelps to bring in some of this media. Per Dr. Baird: The Chronic Pain Initiative Committee continues to meet monthly and develop protocols for prescribing opiates to patients in Humboldt County. Per Dr. Pleatman: Jerold Phelps rarely sees prescription drug overdoses in the hospital. Per Dr. Baird: Most patients who overdose do not live to go to the ER. Dr. Baird met with The Partnership Healthplan of California to voice his concerns over rural health clinics and primary practices owing money back to Medi-Cal due to an accounting error under "Code 18". Code 18 allowed them to get wraparound funding for Medi-Cal to raise the amount back to where they were before the partnership instituted a capitated rate. However, due to the error that few of them noticed, providers will owe back to Medi-Cal an average of \$100,000, which would bankrupt every primary care practice that did not withhold the reimbursements. Per Tim: Public Health-Emergency Preparedness hired a new analyst/Hospital Preparedness Program Coordinator—Bill Linn. He previously held this same position a few years ago before transferring to Social Services. He is currently learning/re-learning his previous duties as well as new duties. Tim will be working closely with him on various projects.

St. Joseph Hospital—Per Dr. Moustafa: They have a field care audit lecture series once per month. The last lecture was by Dr. Michaels, Chief Cardiologist, on STEMI. It was well attended. The next audit may be at the Samoa Dragstrip with Humboldt Bay fire department. Dr. Moustafa may transfer his PCMD position at St. Joseph to another doctor to focus primarily his role as Medical Director of Redwood Memorial.

CAL-Fire—Per Paul: The microwave link is completed and working well. Humboldt County fire crews are assisting in fighting the various fires in the region, specifically in Laytonville. Local firefighters are helping to staff the local offices while the firefighters are away.

Arcata Mad River Ambulance—Per Doug: Nothing to report.

7. Next Meeting: Wednesday 09/10/14 at Redwood Memorial Hospital at 9:00 a.m.