



PENNSYLVANIA EMERGENCY HEALTH SERVICES COUNCIL
Your Voice In EMS

PEHSC BOARD OF DIRECTORS MEETING
Spooky Nook Sports, Manheim, PA 17545
Doubletree Hotel, Lancaster, PA
Wednesday, September 5, 2018

Minutes

CONVENE BOARD OF DIRECTORS MEETING

Mr. Henry, President, called the meeting to order at 3:00 pm and introductions were made.

BOARD MEMBERS PRESENT

Allegheny County EMS Council – Douglas Garretson
Allegheny General Hospital – David Lindell
Ambulance Association of PA – Don DeReamus
Center for Emergency Medicine of Western PA – Walt Stoy, Ph.D.
Center for Emergency Medicine of Western PA – Ronald Roth, MD
Centre LifeLink EMS – Kent Knable
Cumberland Goodwill EMS – Nathan Harig
Good Fellowship Ambulance and EMS Training Institute – Kimberly Holman
Harrisburg Area Community College – Robert Bernini
Highmark, Inc. – Robert Twaddle
Horsham Fire Company No. 1- Duane Spencer
Non-Profit Emergency Services of Beaver County – Steve Bailey
Northwest EMS Inc. – Scott Kingsboro
Pennsylvania ACEP – Bryan Wexler, MD
Tower Health - Anthony Martin
Tower Health – Mervin Wertz
Valley Ambulance Authority – J.R. Henry
VFIS/Education & Training Services – William Niehenke
VFIS/Education & Training Services – Jerry Ozog
Wellspan York Hospital – Steven Schirk, MD
Wellspan York Hospital – Thomas Yeich, MD
Williamsport Area Ambulance Service Cooperative – Gregory Frailey, DO

COUNCIL MEMBERS PRESENT

Chester County Department of Emergency Services – Harry Moore
Chester County EMS Council, Inc. – Leo Scaccia
Emergency Health Services Federation, Inc. – Michael Reihart, DO
First Aid and Safety Patrol of Lebanon County – Anthony Deaven
LTS EMS Council – Carla Miller
Medical Rescue Team South Authority – Josh Stuart
Pennsylvania Athletic Trainers Society – Robert Shank, Ed.D
Pennsylvania State University – J. David Jones
Pennsylvania Trauma Systems Foundation – Juliet Altenberg, RN
Pennsylvania Trauma Systems Foundation – David Bradley
Seven Mountains EMS Council – Patrick Shoop
Uwchlan Ambulance Corps. – John Applegate
Uwchlan Ambulance Corps. – Emily McCarthy
Western Berks Ambulance Association – Anthony Tucci

OTHERS

Jeff Boyle, PEMA

BUREAU OF EMS

Dylan Ferguson

PEHSC STAFF

Janette Swade, Director

Patricia Morrison

Angela Poorman

Donald Potter

Andrew Snavelly

APPROVAL OF MINUTES

A motion was made by Dr. Frailey and seconded by Ms. Blecher to approve the previous board meeting minutes of June 20, 2018. (Motion Carried.)

PRESIDENT'S REPORT

- Mr. Henry welcomed the following new board members: Ambulance Association of Pennsylvania, Burholme EMS, Centre LifeLink EMS, Hospital and Healthsystem Association of PA, Southern Alleghenies EMS and Valley Ambulance Authority.
- Mr. Henry read the names of this year's award winners: Jude Spellman, ALS Practitioner of the year; Cody Williams, BLS Practitioner of the year; Jessica Bell, Communicator of the year; Agnes Dickson, Educator of the year; Joyce Foresman-Capuzzi, Amanda E. Wertz EMS for Children award; Ben Usatch, David J. Lindstrom EMS Innovation award; DLA Federal Fire Department, Rescue Service of the year; Boyertown Ambulance, Small Agency of the year and Lancaster EMS, Large Agency of the year.
- All of this year's sponsors and vendors were named and thanked for their participation and support.
- Mr. Henry thanked Mr. Jones for his leadership as the President of PEHSC and for his efforts with SR6.

TREASURER'S REPORT

Dr. Roth, Treasurer, gave the following report:

PEHSC Account Balances FY 2018-2019

		CASH BALANCE AS OF:						
ACCOUNT	ACCOUNT DESCRIPTION	7/31/2018	8/31/2018	9/30/2018	10/31/2018	11/30/2018	12/31/2018	
Contract Fund	2018-2019 Contract Amount \$421,539.00	137,276.20						
Payroll Account	Transfer Account	22,866.63						
Investment Income Fund	Income from Previous Investments HRA	3,399.78						
Secondary Income	Conference & Secondary Income	46,824.06						
Investment Funds transferred to PAEMSA 8/2015	Monthly Dividends into Balance	251,814.40						
		CASH BALANCE AS OF:						
ACCOUNT	ACCOUNT DESCRIPTION	1/31/2019	2/28/2019	3/31/2019	4/30/2019	5/31/2019	6/30/2019	
Contract Fund	2018-2019 Contract Amount \$421,539.00							
Payroll Account	Transfer Account							
Investment Income Fund	Income from Previous Investments HRA							
Secondary Income	Conference & Secondary Income							
Investment Funds transferred to PAEMSA 8/2015	Monthly Dividends into Balance							

Ms. Bleacher motioned and Mr. Bernini seconded to accept the Treasurer's Report.

(Motion Carried.)

(The Treasurer's Reports are on file for members to review.)

EXECUTIVE DIRECTOR'S REPORT

Ms. Swade, Executive Director, gave the following report:

- Received the EMSOF portion of our FY18-19 contract for \$421,000. An amended contract for EMSC to come soon.
- We will process our final invoice for FY17-18 tomorrow.
- The annual report has been submitted to the Department and posted on our website.
- Please take a look at the documents posted in the Adobe meeting room.
- Conference statistics for this year's program were shared; numbers are up from last year.

DEPARTMENT OF HEALTH REPORT

Mr. Ferguson provided the following report:

➤ Legislative

Approximately 65 bills related to EMS have been introduced in the general assembly this legislative session
Strong advocacy and organized efforts remain for treat/no transport

Saw Medicaid increase this year

The House has 9 voting session days remaining

The Senate has 10 session days remaining

➤ SR 6 Update

The next meeting is September 19th at the State Capitol

➤ Department Discussion

Discussion/Clarification/Questions of recent Department communications as found posted with meeting document.

➤ Data/NEMSIS

95%+ compliance so far

Updates to validation files is continuing

➤ Misc.

Agency licensure application updates are still in process

Naloxone leave behind program web based training is being developed

Mr. Spencer commented that he felt the number of patients actually encountered was lower in his experience than what the Department was reporting. He felt that there is too much concern for the people overdosing and not enough concern for the well- being of the providers.

Dr. Reihart mentioned that the book Dreamland provides a good perspective from the side of the addict and may help providers change their mind set about these people.

➤ VTR Status

All VTR's submitted after the last board meeting have been dispositioned and included a meeting with the Critical Care committee

Mr. Henry asked Mr. Ferguson to comment on the EMSOF Audit by the Auditor General. Mr. Ferguson said the department was making improvements on collecting supporting documents for invoices and ensuring the receipt of annual reports from all.

PRESENTATION

911 Advisory Board Update – Jeff Boyle, PEMA

SENATE RESOLUTION 6 UPDATE

Overview of the EMS section of the SR6 Report – Dave Jones

TASK FORCE/COMMITTEE REPORTS

Medical Advisory Committee – Dr. Reihart, Chair, provided the following report:

The medical advisory committee met my webinar on August 15th and submits the following report to the board:

1. EMS Bureau Director Dylan Ferguson updated the committee the Department's response to VTRs submitted by the board on behalf of the MAC. Specifically, those related to the use of air medical protocols on ground critical care ambulances and; the proving a pathway to also permit ground critical care ambulance services to establish agency-level protocols.
2. PA Trauma Systems Foundation Executive Director, Juliet Altenberg, provided a presentation on work being done by the foundation's development committee. Juliet outlined proposed changes to the current EMS Act related to changing the number of patient contacts for Level I and II trauma centers and, the minimum distance between trauma centers.
3. Dr. Kim Roth reported that EMSC's survey of hospital emergency departments regarding pediatric patient transfers is now at 73% with a goal of 80% participation. Dr. Roth also reported the 2018 version of the Emergency Guidelines for Schools is now available on the PA EMSC website – there is also a small quantity available in hardcopy.
4. Butch Potter reported on the initial meeting of the joint MAC – Critical Care Task Force workgroup that is exploring strategies to increase critical care transport resources. This was very productive meeting and was attended by both Director Ferguson and Dr. Kupas. The Critical Care Transport Task Force report will provide more details about the meeting.
5. Dr. Paris and Wadas presented a possible pilot project to obtain early feedback from the MAC. This proposed pilot would remove current restrictions from the Advanced EMT, which would better enable the provider to provide primary ALS care when an area's paramedic resources are depleted. Many areas of Pennsylvania are having a difficult time recruiting and retaining paramedics, resulting in some agencies struggling to maintain 24 hr ALS operations.
6. Dr. Frank Guyette, Stat MedEvac Medical Director, presented a research project for the committee's endorsement. The study, entitled Pragmatic, Prehospital Group O Blood Early Resuscitation, is an NIH funded project that will explore the use of whole blood on air ambulances for patients with severe hemorrhage. The study follows a previous project that looked at prehospital blood plasma administration. The committee voted to send a letter to the Department recommending approval of the study.
7. Work on the 2019 statewide treatment protocol update is in progress. In addition to previous recommendations from MAC and other committees, PEHSC has launched an electronic stakeholder survey. The information gathered from the survey will be forwarded to the committee and Dr. Kupas in preparation for the November 28th MAC meeting.
8. Dr. Reihart brought up a concern that the current medical command physician course is only available on PA TRAIN. I believe the system would be best served to allow for both distributive learning or live presentation of this program – a live presentation provides a forum for discussion with the presenter. The current course also rather old and should be updated to include significant protocol changes. Director Ferguson commented that the Department is looking at this on a similar recommendation from the regional training coordinators. Another member suggested a hybrid option; present the basic course information online, then follow that up with a 1-2 hour live session.
9. Dr. Reihart announced that the PA Chapter of NASMSP was approved on August 21st by the National NAEMSP. More information will be forthcoming as the chapter evolves.

EMS for Children Advisory Committee – Mr. Stuart, Chair, provided the following report:

The EMSC program just wrapped up our 2018 surveying of all hospital emergency departments as part of a nationwide assessment on PM's 06 & 07 – interfacility transfer guidelines and agreements.

More than 3,500 hospitals participated across the U.S. and in PA we achieved the goal of an 80% response rate in the final day of the survey period, and actually ended up with a response rate of 84%!! Huge thanks goes out to all of our partners on this who worked really hard to help us meet this goal, including: the regional council offices, HAP, BPHP, PTSE, BEMS, the committee, and many others. Great team work and we would have not met that goal without all that help.

We recently submitted our carry over request for the 2017/2018 year. That request totaled a little more than 22k and was mostly allocated to cover the cost of the printing of many projects that will help support the goals of the EMSC program performance measures. We are still awaiting approval of this funding.

We still have a few pedi mate devices left over from the bulk purchase with last year's funding. If you have an agency in your region that is unable to meet the requirement of the equipment lists due to funding please contact Angie for assistance. Please note, these will only be distributed for front line vehicles only.

Due to significant formatting and compatibility issues the Safe Transport video placed on TRAIN had to be pulled down until a solution can be found. We will still be offering the in-person workshops that cover the same information and allows for a practical hands-on component that the video could not provide. There is no charge for this course, please contact Angie if you would like to host a workshop with your local regional offices, hospitals, or EMS agencies.

In July EMSC state partnership grantees were notified of a new funding opportunity available to a select 10 states in which the award will be used specifically to support PM 02- establishing a PECC.

The supplemental funding is for 100k and will support building a statewide program that will target the establishment of a pediatric care coordinator into EMS agencies as part of a multi-state collaborative. This award had a very quick turnaround time of only a couple weeks, but we did get our submission in and should know the results of those selected awards by the end of September.

The annual in person meeting for EMSC is scheduled to be held on Thursday September 13th at 10am. Please note we are in a NEW LOCATION due to construction at our normal Rossmoyne suite at the Hampton Inn. We will now be in the Susquehanna room in the main hotel at the Hampton. Please contact Angie if you have any questions or would like information on attending.

Critical Care Task Force – Mr. Spencer, Chair, provided the following report:

The joint MAC and Critical Care workgroup met on July 23rd; the original agenda of this meeting was expanded to so discuss VTR responses by the Department; both Director Ferguson and Dr. Kupas were in attendance.

- I. At the June PEHSC board meeting, VTR 0618-03, supporting the ability of licensed ground critical care ambulance agencies to create Department-approved agency-level protocols. The recommended process would follow the same pathway used by air ambulance agencies. In responding to the VTR, the Department stated:

“At this time the Department feels that the critical care protocols published by the Department are the best mechanism to ensure safe, consistent and uniform quality of care in the critical care environment by ground critical care providers. If the MAC or CCT task force feels that there are gaps in the statewide critical care protocols, the Department encourages them to submit joint recommendations to the Commonwealth EMS Medical Director for review.”

- a. A question was raised regarding ground critical care agencies that staff ambulances with both a paramedic and PHRN, some of which are operated by hospital systems that also provide specialty retrieval services.

After a lengthy discussion, the Department stated it supports development and use of ground CCT protocols by agencies that are owned/operated by a hospital, although issuance of written guidance to the regulated community is contingent on review by the Department's Office of General Counsel. Agency-level protocols would only be utilized when a PHRN is part of the transport crew, otherwise the crew would follow statewide protocols.

- b. *The Department does not support the development and use of agency-level protocols by licensed ground critical care ambulance agencies that are not owned/operated by a hospital. The Department cited concerns for patient safety related to the absence institutional support as the basis for this position.*
- c. The Department did reaffirm its support for air ambulance agencies, who also operate ground critical care ambulances, to utilize their agency specific protocols during ground operations, provided the crew includes a PHRN.

2. The balance of the meeting focused on the reported shortage of critical care transport resources throughout the state. The group established the following working assumptions:
 - a. We need both a short and long-term solutions. Short-term solutions are ones that utilize existing resources more efficiently and do not require regulatory or statutory changes.
 - b. Not all CCT agencies have the same resources to support their operations.
 - c. We need to differentiate between patients who fit the “critical care” definition based on acuity and those who are stable, but have a care plan that includes therapies outside the ALS paramedic scope of practice.
 - d. Stable patients can likely be transported using an alternative critical care crew configuration, which is less costly and better utilizes crew resources.
 - e. Better triage tools are needed to assist physicians in differentiating low vs. high acuity patients is it relates to selecting transport resources.
 - f. The current regulations and policies, which are intended to ensure patient safety, may be overly restrictive and potentially detrimental if they cause unreasonable transport delays, especially in time-sensitive illness or injury.

The group’s next meeting will be on October 10th, where the members will focus on making recommendations to the MAC and Commonwealth EMS Medical Director on changes to the statewide critical care transport protocols, associated changes to the CCT paramedic scope of practice and approved drug list.

ORGANIZATION REPORTS

Pennsylvania Trauma Systems Foundation – Ms. Altenberg provided an update on a proposed change to the EMS Act (Act 37) to modify existing trauma center requirements.

OTHER BUSINESS

Mr. Henry thanked the past members of the Executive Committee for their service – Dave Jones and Tony Deaven.

NEXT MEETING DATE

The next meeting will be held on December 5, 2018 via web conference call.

ADJOURNMENT OF BOARD MEETING

Following the business of the day, Mr. Spencer motioned and Ms. Blecher seconded to adjourn the Board of Directors meeting.

Respectfully Submitted,

J. R. Henry
President

JRH/pm

Please Note: Recommendations voted upon at meetings are reflective of the consensus of the group present at that meeting, and does not guarantee a policy or procedural change by the Pennsylvania Department of Health and the regional EMS councils.