

**PC EMS COUNCIL
OPERATIONS COMMITTEE MINUTES
July 27, 2016**

Attendance:

Membership Attendance Roster on File.

Call to Order

Russ McCallion chaired the meeting was and called it to order at 10:07am. Introductions were made and previous meeting minutes were provided, voted on, and accepted as written.

Unfinished Business:

A. Divert Report – ~~Todd Jensen~~ not in attendance

Dr. Waffle reported on Divert, saying the committee met for the 3rd time. They are taking a close look at the problem and dealing with it as a capacity issue rather than a divert issue. They are also taking a countywide approach because it's a countywide problem, discussing county resources and patient access. The now have a committee to make decision to better utilize resources. The biggest accomplishment is the new approach to it. Their motto: THE RIGHT PATIENT – THE RIGHT PLACE – THE RIGHT TIME.

B. TPCHD Update – Cindy Miron

1. POD Plan

There are no new updates as far as communicable disease is concerned.

Regarding the POD plan, we are looking at revamping the program and going to a “Hub and Spokes” medication plan.

Results are back from the strategic review and we did very well.

There will be an NDMS exercise August 2017. Our next meeting is in October to plan a full-scale exercise at JBLM-McChord Airfield.

2. WATRAC at DOH

WATRAC moved to DOH, and they are trying to learn the program. Scott is very involved and will provide updates.

As a result of the Cascadia Rising Exercise, the Dept of Health will be doing a lot more catastrophic/disaster planning.

C. Hospital Data Information Exchange – Russ McCallion

We are seeing solid progress being made. Pierce County is not the only one using HDI. Karrie met with executive leadership to move ahead. The legal department is reviewing it. ESO is cheaper, works better and they will probably go with that. We are all looking forward to a better system. It's very low cost, saving in staff time, making a big improvement. Dan asked about the cost of the pilot. Karrie answered that MultiCare will go live and not use a pilot. Data can be aggregated which can be a benefit to the MPD enabling him to look at the big picture.

D. Good Sam-EMS to Triage program update – Karrie O’Brien

The only change dealt with the problem of when EMS went through the back door, there wasn’t much room. They have now added a triage room at the front door for EMS to be able to offload patients right at the door.

E. MCI Plan – (tabled – update still in progress)

1. DMCC – Patient Distribution Change – Karrie O’Brien

After experiencing the Cascadia Exercise and the West Pierce event, we’ve been strongly convinced to adopt King County’s approach, not just in MCI, but in all the hospitals using the set bed count.

New Business:

A. Changeover Time of Trauma Services – Barb Carrier, Regional Trauma Director, CHI

Per Barb: As you know, SJMC and TG change trauma status daily at 0700. We are trying to hardwire the 7AM time and need EMS’ help with ensuring ETAs are accurate as possible. There are two scenarios for our trauma patients:

1. Trauma patients coming from the field by EMS
2. Trauma patients transferring from another facility to either SJMC or TG

What do you suggest is the best way to get the word out to all of the agencies regarding ETA’s? Also, would it be feasible for the medics to call back if the original ETA needs to be revised?

Much discussion followed regarding the difficulty to predict ETAs at that time of day or of those coming from a great distance. Who do we call and at what time? There were also concerns about how to handle situations with the hospital trauma teams arriving around the time changeover. Response was for the field unit to call the active trauma center up to 7am and to let them know if they think they will arrive after 7am they will go to the active trauma center at time of arrival. The hospital ED trauma surgeon who receives the call will notify the other facility if they need to that facility instead. More discussion to occur in the following weeks.

B. Review/Approve 2008-2013 Divert Plan – Norma

The 2008 plan never got back to the PCEMS Ops committee for approval. The last one was 2005. We are now distributing the new plan for review and feedback. Norma expressed concern that Madigan isn’t on the current plan but needs to be on the new one. Russ asked if we approve it now or come back later to do so. Dr. Waffle says they are working on updates. Norma pointed out some issues that could be clarified. Russ recommended that we table this until next meeting and asked that everyone review the plan and be ready to formally vote on it next time.

C. Min/Max EMS License Numbers Review

Norma said it’s time to have an Ad Hoc group to meet and look at the numbers. Norma called for reps: Scott Jones, Dan Beckman, Joe Koehler, Cynde Rivers, Brad Dyson, and added Kevin. She said we look at WAC, what’s been turned in historically, look at trends in calls, zones, etc.

Unscheduled Business:

In the Council Meeting it was approved for EMS Committee Appointees to remain in their positions as long as they are still a part of the agency. We need to select member representatives who are still needed. The current reps can volunteer for continued service.

From DOH – rehab beds are in short supply and it has been approved to get more at Good Sam.

Announcements:

None.

Adjournment:

Meeting Adjourned @ 11:00 am.