



ST. LAWRENCE COUNTY
EMERGENCY MEDICAL SERVICES
ADVISORY BOARD

September 24, 2013

Meeting was called to order at 1903 with Chris Adams in chair. Roll call taken and duly recorded. Corrections to the minutes of the previous meeting were made. Motion to accept made by Dick McDougall, seconded by Ann Smith and carried

Members present: Dick McDougall, Phyllis McDougall, Carol Muench, Tom Tomlins, Ken Gardner, Don Thompson, Curtis Newtown, Ann Smith, Chris Adams, Craig Ballard, Cindy Rockhill, and Bill Sova

Members excused: Storm Cilley, Jean McLearn, Kevin Wells, Dan Parker, and Wayne Love

Members absent: Dr. Greg Healey, Julie Sciori

Guests: James Stockman – NCEMS Program Agency,

- Correspondences:**
1. A letter of interest in joining the board was submitted by Neil Carlton. Appointment will be dependent upon vacancy availability and Chris will check with Tammy.
 2. David Montroy is requesting the direction he has to take to have North Lawrence FD to become a Certified First Responder (Emergency Medical Responder) unit. Motion was made by Ann Smith to offer the board's support to have NLFD establish a CFR/EMR unit, seconded by Curtis Newtown and carried.
 3. A letter was received from the Croghan Vol. FD stating they were hosting a BLS CME weekend on October 4th & 5th.

NCEMS Program Agency – Jim Stockman gave his report of what the Program Agency has been doing. A copy has been included with these minutes.

Office of Emergency Services – Joe Gilbert was present and gave the following report:

1. Re: Interference on F1 is a result of Fort Drum operating on the same band width and the interference appears to be coming from the radio until being used in the field not from their base. Joe stated he was going to meet with them and give Fort Drum a list of our frequencies so they can be blocked out from their field operations.
2. Joe reported there is a grant being requested which he hopes will be given 14 more additional channels but does not know anything about this at this time.
3. He discussed 2 consortiums regarding microwave and radio frequency connections. Mentioned simulcasting paging with Franklin County which will be able to communicate from low band to VHF. Central New York is gaining UHF trunking which he hopes will be done in this county as well.

4. Re: HazMat team. Joe gave some background of what happened to the county HazMat team. The problem was the team members were being paid and the county was responsible for 2½ times their salary. To upgrade to current certification would cost \$35,000 and we are about to lose the grants and consortiums leaving only \$7000 in training funds. OFPC got Franklin and Jefferson counties to allow St. Lawrence County to join their consortiums and Joe does not expect this to happen due to the cost factor. He went to the board to dissolve the team due to payments to municipalities and the Board of Legislatures voted no to a volunteer team and they also voted no to funding a paid team as there are no funds to train them. The compromise was to write an annual check of \$17,500 to the City of Ogdensburg to cover all cost (i.e., FD, police, etc.).

Air Methods – 1. Ann reported the accreditation services was just completed but will not know the results until the end of October.
2. The local aircraft is down for maintenance and a black and white helicopter will be used in its place.

Hospitals – CPH – 1. Carol Muench reported she spoke with Ray Thielke regarding the care of patients being transported out of CPH and the use of morphine. She was concerned over the amount of morphine can be taken out of the hospital for the patient. What is being allowed to be carried seems to be different from pharmacy and what providers use.
2. She also expressed concern over the increase of the use of heroin coming into this region along with the use of Mollies/Bath Salts. She would like to see the hospitals provide some education to the county EMS providers.

MMH – 1. Cindy Rockhill expressed concerns regarding the administration of narkan for narcotic OD by basic EMTs and police officers.
2. Cindy asked when does a patient go to the ER versus calling a helicopter as a result of a call in Massena/Norfolk area. On October 11th, Cindy, Dr. St. Pierre, Massena Rescue, Ann, Chris, the Program Agency will meet to discuss looking into better communications between MMH and Massena.

Training - 1. Meeting with Ray Thielke on Thursday, October 15th at 7:00 at the Canton Fire station regarding the mandate that all ALS agency must carry narcotics or lose their ALS accreditation.
2. CME weekend training at the Croghan FD Oct. 4th & 5th
3. Dick McDougall reported the Mountain Lakes EMS Initial Assessment Conference in held in Lake Placid earlier in the month was very good and well run and recommends attending it in the future.

Unfinished Business – 1. Re: dispatch times. It was asked that dispatch follow the recommendation of the Advisory Board regarding when someone acknowledges a call, times are off the table.

New Business – 1. Chris reported we just received, in August, the approval from REMSCO for the appointment of Ann Smith from last November 2012.

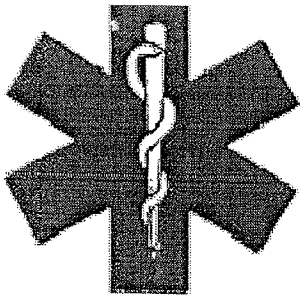
Regarding the monthly meeting in November, due to Thanksgiving, Dick made a motion to move the next SLC EMS AB meeting from the last Tuesday of the month to the third Tuesday, November

19th. Motion was seconded by Tom Tomlins and carried. The next monthly meeting will be at 7pm at the Office of Emergency Services on November 19, 2013.

Upon a motion made by Curtis Newtown and seconded by Craig Ballard, meeting was adjourned at 2029 hours.

Respectfully submitted,

Donald Thompson
Secretary



North Country EMS Program Agency

“Serving Jefferson, Lewis & St. Lawrence Counties”

James Stockman, EMT-P, Director

Mysti L. Putnam, Secretary

September 2013

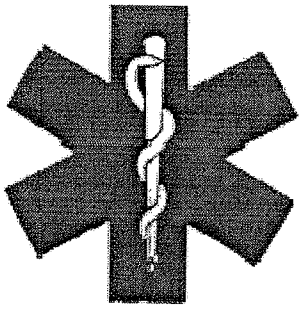
Program Agency Report:

- Air Medical Screen is complete
- The Fourth quarter Report was completed.
- Conducted 13 ALS inspections and all ALS agencies are being done due to the change in equipment. 15
- I met with Addie Russell to discuss the proposed article 30 changes.
- Sent letter of concern about future ALS designation as it applies to units carrying Narcotics to New York State DOH. Lee Burns.
- Developed an internal REMAC Patient care Restriction Procedure Policy
- Updated our ALS Agency Data base
- 2 New PAD
1 New Albuterol
- Conducted a lecture on Situational Awareness in EMS at Edwards
- Conducted an in service on PCR documentation at Herman Rescue
- 4 agencies sent PCR correction letters
- Attended a Dynamic's and Recognition of IED's for first responders course,
- Attended the following meetings: St Lawrence EMS meeting, Lewis County EMS meeting, Ft Drum Regional health Planning board,
- Attended a meeting with Ray Thilke discussing NYS controlled substance policy,
- Assisted with Gouverneur Rescue, Canton Rescue, and Ft Drum transition to E-PCR
- Revised and distributed a Regional RSI Policy Draft to the REMAC.
- Assisted Cape Vincent with a NYS ambulance certification issue
- Resolved 4 previous CQI issues.
- Assisted with Cantons CON
- Attended the Public meeting for Cantons CON
- Submitted a Trauma and Medical Study draft to the REMAC for their consideration for the 2014 Regional Study
- Protocol apps up and well received.
- The following motions were passed by REMAC/REMSCO
 1. Coonstableville upgrade to ALS (Pending inspection)
 2. Regional RSI policy
 3. Canton, Ft Drum transition to EPCR's
 4. Dr Matarese new Ft Drum EMS Medical Director
 5. Kim Crowner Howard Rieger CME Evaluators
 6. Beaver Falls approved for King airway
 7. REMAC internal CQI policy

Out 15th Canton 7.00

34 Cornell Drive Canton, New York 13617

• Toll Free: (866) 475-3977 • Office: (315) 379-3977 • Fax: (315) 379-3979 • www.canton.edu/nccems



North Country EMS Program Agency

“Serving Jefferson, Lewis & St. Lawrence Counties”

James H Stockman, EMT-P, Director

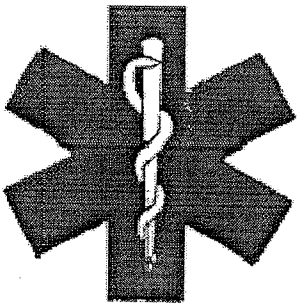
Mysti L. Mattice, Secretary

Regional Air Medical Utilization Study

The North Country EMS Program Agency received screens filled out by providers every time Air Medical was utilized in the pre-hospital setting. During the study, the Program Agency received 13 screens one being an interfacility transfer and the information was entered into an access database. Consistent with the goals and objectives of the study abstract, the findings are outlined below:

Are providers utilizing Air Medical Properly?

| <u>Item</u> | <u>number</u> |
|---|---------------|
| Aircraft requested by dispatcher | 3 |
| Aircraft requested by first responder | 10 |
| Interfacility transfer | 1 |
| Aircraft Utilized Life Net | 13 |
| Mechanism of Injury | |
| Fall | 3 |
| MVA | 6 |
| Vehicle Vs. Pedestrian | 1 |
| Ejection | 2 |
| Crush injury | 1 |
| Was Platinum 10 Min adhered to on scene | |
| YES | 3 |
| NO | 10 |
| Documentation for those calls that 10 min on scene not adhered to | |
| YES | 10 |
| NO | 1 |
| UNK | 2 |
| Was Medical Control Contacted/ Consulted | |
| YES | 4 |
| NO | 9 |
| Was patient airway manageable | |
| YES | 12 |
| NO | 1TX by AMB |
| Did the patient arrive at a trauma center within 90 minutes | |
| YES | 11 |
| NO | 0 |
| UNK | 2 |
| Time of aircraft to the scene | |
| <10 min | 5 |
| <15 min | 2 |
| >20 min | 5 |
| Time of Aircraft to Trauma Center | |
| >30 min | 7 |



North Country EMS Program Agency

“Serving Jefferson, Lewis & St. Lawrence Counties”

James H Stockman, EMT-P, Director

Mysti L. Mattice, Secretary

| | |
|---------------------------------------|---|
| >40min | 4 |
| Inter facility transport or ground TX | 2 |

Conclusion

This Study ran from 1Jan 13- 1 June 13. The fact that only 13 screening forms were submitted out of approximately 52 flights even after several reminders will result in a change in the way that we do future studies.

What we can ascertain from the results that we have that;

- Our field providers have no reservations using Air medical for their Major trauma patients.
- That at times the “Platinum 10 minutes” may not always be achievable but our providers are documenting the reason why.
- We are getting viable trauma patients to trauma centers expeditiously
- Requested Aircraft are arriving on scene quickly
- Transport time from the scene to the trauma center is greatly reduced
- Medical Control is being contacted when needed.
- Air Medical Is an valuable asset to our region

Actions

Future studies will be completed from pre-hospital care reports by the North Country EMS Program Agency to obtain more accurate data for the next regional CQI study.