

**Northwest Community EMS System
Advisory Board
MINUTES – September 20, 2012**

Topic	Discussion/conclusions
Call to order	At 9:05 am by Pete Dyer
Approval of agenda & minutes	No additions to the agenda. Motion to approve the minutes by Tom Wang and Second by Brian Stennett. Motion approved. Pete Dyer extended his condolences to the Village of Bloomingdale and the family of Wally Beahan on his passing.
CARS Committee Rick Nosek	Rick reported that Service bridge has been updated to 5.5. The end user will not see any real changes. Most are of administrative significance only. Make sure trouble tickets are copied to Connie and Rick so we can track them. The ECG import issue has been fixed. The website continues to be updated with breaking news and meeting calendars. Please encourage all members to use the website as their source of news, current standards of care, forms, documents, and CE references.
PBPI Susan Wood	PBPI has been collecting and analyzing data and working with the CARS committee because of the cooperation both need to achieve their charges. PBPI and CARS had a joint meeting to share needs and determine action items. They are currently studying the System's care of patients with stroke and are creating a screen to study IV starts. The committee issues a tip of the month that is posted to the website based on learning needs revealed by the data results and it seems to be successful.
Research & Development Diana Neubecker	The committee reviewed the new Zoll Monitor, a new c-collar and a back board with wheels. The new Zoll monitor was approved by R&D.
Education Committee Connie Mattera	<p>Connie shared national, state and local educational news. The state is still working on transitioning to the national scopes of practice and educational standards. There continues to be significant disagreement about the process and the state will try for legislative changes again in the spring. EMT transition modules are being prepared by Chris Dunn and issued to the System members for their educators to update the EMTs. The next one will be module 4.</p> <p>The spring paramedic and EMT classes both did exceptionally well on the state exam. Both programs continue to be updated to the national EMS Education standards to ensure that content and skill revolutions are fully covered and competency is documented. The fall EMT class has full enrollment and they are progressing well with an increased emphasis on pathophysiology and scenarios to engage students in higher order thinking. Peg Drag has been working to prepare for the incoming paramedic class. We are grateful that the class also has full capacity enrollment thanks to the number of agencies that stepped forward to offer field internship opportunities for unaffiliated students. The class agenda has been modified to reflect feedback from the previous class on the need for more lab time. Hospital clinical sites have been informed of the program needs for clinical shifts and the clinical instruction plans have been resent to the unit managers. Also in response to previous feedback, incoming unaffiliated students have been asked to ride all summer as observers with their assigned provider agency to gain advance familiarity with the policies, procedures, and culture of their host department. Communication continues with Harper College to expand the number of credit hours for both programs based on the increase in contact hours. A representative from Harper College will be conducting a faculty observation and review for Chris Dunn this fall. The Board was asked if they had any other feedback or suggestions for program planners. There were none.</p> <p>Connie reported that the July CE needs assessment results will be coming as soon as she gets updated software to create the needed item analysis.</p> <p>Board members were reminded that the November in-station classes are mandatory airway testing for the paramedics and PHRNs.</p>
Emergency Preparedness	The mass casualty policy and also the persons with special needs are being looked at. The System has been conducting Summits seeking input from all stakeholders to gather their feedback and ideas. Annie took the results of our findings to Region 9 and facilitated a consensus document that will go into the new SOPs. It is anticipated that education on the new model will occur in the spring.

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Policy review	Proposed changes to Policy E-3 were discussed section by section. Motion to accept as rewritten made by Rick Nosek, second by Brian Stennett. Motion passed unanimously on voice vote.
Ryder Cup	Connie thanked all System providers who are participating in some way in the upcoming medical coverage of the Ryder Cup. There are over 200 volunteers in addition to significant time commitment by all Resource Hospital EMS staff. This has been one of the largest projects ever undertaken by the System and the event starts in a couple of days.
Old Business	Invalid assist policy. Dr Ortinau shared his concerns that there seems to be differences in how each agency responds to, handles, and documents invalid assists. We need to be on the same page. Tony Minarcik said that there are many types of invalids and some are not medical emergencies and some are. Dr Ortinau contends that every person to whom EMS responds should be assessed to determine if they meet the criteria to be a patient, and then a decision can be made as to the best course of action. The general discussion ensued and Connie was charged with drafting changes to the policy.
Adjournment	Motion to adjourn made by Chief Wax; Second by Brian Stennett. Meeting adjourned at 1100.
Next meeting	November 15, 2012