

**Northwest Community EMS System
Chiefs/Administrator's Meeting
MINUTES – September 15, 2017**

Topic	Discussion/conclusions
Call to order	<p>Meeting called to order at 8:30 AM by Dr. Matthew Jordan. Agenda was approved as submitted.</p> <p>Jim Walters was introduced as the new Chief of Schaumburg. Retiring very shortly are Chief Franzgrote, Rolling Meadows, Vic Tamosaitis, Arlington Heights; and Chief Jorian (HEFD). Rick Manthy will be succeeding Vic as the PEMSC at AHFD. All were thanked for their years of service to the System.</p>
Advisory Board Michael Sharp	<ul style="list-style-type: none"> • Chief Alan Wax announced two new Chief alternates to fill the empty Board positions. Nominees were Tom Krueger of Lincolnshire Riverwoods and Jim Arie of Barrington FD. Motion approved unanimously. • Patients in Law Enforcement Custody policy (L1) was approved 9-14-17. It will be taught during the October CE classes on Medical Legal and Ethical Concepts but all agencies are encouraged to cover elements of the policy in their daily briefings. Many thanks to Commander Kristine Provenzano (Special Operations Commander Schaumburg PD) and Chief Charles Walsh (Elk Grove Village PD) who sit on the Board and gave extremely valuable insight and advice in creating this policy. • The RI policy (Relicensure, reinstatement, dropping to a lower level of licensure: EMT, Paramedic, PHRN) has been revised, due to ongoing issues with expired licenses and gaps in understanding as to how a license should be renewed, reduced in status, and/or reinstated. EMS Agencies are asked to go over the updated policy with all EMS members.
Provider Based Performance Improvement (PBPI) Committee Jason Brizzell	<ul style="list-style-type: none"> • The report on stroke patient transport destination showed great results. Only a small percentage (6%) were inconsistent with SOP. • Jason provided results for ketamine, fentanyl, and norepinephrine. See written report. • PBPI found that disclosure of risk was not consistently documented for refusal of service calls. The Committee worked with the CARS committee to amend the Image Trend template to facilitate accurate documentation. • Currently in progress are a fentanyl use/dosage screen, along with cardiac arrest, ketamine and sepsis screen. • King Vision success rates will be one of the ongoing 2018 outcomes to be measured.
CARS Committee Jim Klein	<ul style="list-style-type: none"> • The two chief-sponsored attendees to the annual Image Trend conference this past July were Jim Klein (CARS), and Jason Henriksen (PBPI). Both came away with new information and believe the experience to be very helpful. The consensus is that this is the best EMS documentation product for us to use at the present time. The chiefs were thanked for their ongoing support. • Print issues: The Committee continues to work on the various versions of the print options. • Patrick Sennett (Good Samaritan EMSS and Image Trend administrator for the Region 8 & 9 consortium) has been conferencing into the CARS meetings and many changes have been implemented real-time as they are discussed. Some remaining issues cannot be fixed locally and have been escalated to Image Trend software developers in Minnesota. • The Image Trend Administrator class held at NCH went so well, Jim would like to schedule others as they are needed.
Education Committee Joe Tobiasz & Connie Mattera	<ul style="list-style-type: none"> • The previous Paramedic class outcomes were presented in a handout, showing great results. Connie gave a brief report on changes made to the Student Handbook and class expectations for the class beginning September 11, 2017. • The Committee on Accreditation of EMS Programs (CoA) site visit will take place on October 9 & 10. Connie will complete the agenda for the two days and invite the various cohort groups to be interviewed. These include the Advisory Committee, Program Director, Program Medical Director, current students, former students, chiefs/employers; hospital clinical units; and field preceptors at the EMS agencies. Thanks in advance to everyone who contributes to the excellence of our program. • There has been great feedback on CE classes. Members love the hands-on practical integration. • Connie announced the new staffing plan for CE to use independent contractor Peer IV approved educators within the System to help conduct the classes rather than hiring more full or part-time staff at the Resource hospital. In doing so, there will be no increase in

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	<p>fees for in-station classes in FY 18-19. The System continues to work on the models for education. In researching blended learning options, we are finding some that some commercial products are quite costly. National feedback indicates that fully on-line classes are efficient, but not always effective. Some pricing we have received comes out to \$18.00 to \$27.00 per person, per year. We would still write the CE material.</p> <ul style="list-style-type: none"> • Chief Andersen reaffirmed that they are most interested in being able to contain overtime costs and reiterated that the quality of the classes should not be diminished in any way. To address this concern Connie renewed the offer to allow those who need to make up classes hours to audit paramedic, TNS, and/or ECRN classes. The class agendas are always posted to the System website. • October CE will present Legal-Ethical scenarios as requested by Education Committee members. • The Fall TNS class is large with 34 registrants. We are still partnering with LGH to teach these classes every Wednesday from September 6 through November 21, 2017. Only final practical day is moved to a Tuesday in deference to Thanksgiving holiday.
<p>R & D Committee Ed Rogers & Matt Jordan</p>	<ul style="list-style-type: none"> • King Vision video laryngoscopy trial report to date: 36 attempts; 34/36 (94.4%) successful . If the remaining trial numbers continue to look this positive, Dr. Jordan would like to make this approach to intubation the standard of care in our System. At this point, the System is expanding the number of agencies included in the trial on a first come, first served basis. Dr. Jordan and Drew Hansen will do the training just as they did for the first three Communities in the trial. Buffalo Grove raved about the device, citing its ease of use and great results. A quote from Bountree was handed out at the meeting, and Dr. Jordan went over each item, and their purpose. Line items 1 and 3 are most important. (King Vision Kit, and the Video Laryngoscope channeled blade). We will not be using King Vision blades on pediatric patients at the present time. • Lucas device trial: This trial is also going well. The R&D committee will be reviewing the major piston external CPR devices at their November meeting and a decision will be made to which one(s) will be approved as optional equipment on the Drug and Supply list. • Real Time CPR Devices: There was apparently a gap in understanding as to when Real-time CPR Feedback devices would be mandatory on front-line ALS ambulances in this System. After discussion the Chiefs voted unanimously to set the date of compliance by June 1, 2018 unless a temporary hardship waiver is granted for cause.
<p>New Business Connie Mattera</p>	<ul style="list-style-type: none"> • The Mobile Integrated Health Committee will be reinstating meetings as soon as the CoA site visit is completed. • Save the date: EMS HOLIDAY BREAKFAST: Thursday, December 14th 8:30 am at Chandler's restaurant in Schaumburg
<p>Adjournment</p>	<p>The meeting was adjourned at 10:00 AM. The next meeting is scheduled for Friday, November 17th. at 8:30 AM in rooms LC 1 & 2.</p>