

EMDAC Meeting Minutes – September 16, 2014 – San Diego

Present: . Gilbert, Ballard, Bosson, Squire, Sporer, Brown, Rudnick, Kidane, Duncan, Luoto, Salvucci, Vaezazizi, Michaels, VanStralen, Chase, Haynes, Stratton, Miler, Falck, Bair, Wood, Goldman, Goldstein, Tamkin, K. Koenig, Giannini, Uner, Ord, Shatz, Stubblefield, Trask.

Item	Discussion	Action
Scope Meeting	<p>Coastal Valleys Trial Study – LMA – Mark Luoto reports the study was discontinued because of low enrollment. Use of video intubation device has reduced alternate airway use.</p> <p>Trial Study – Tranexamic Acid in Trauma – ICEMA – The principle investigator presented the proposed study This will include use of TXA as standard of care in the trauma center. Will use control group from prior year. First dose will be given by air or ground EMS crew within the first 10 minutes, following CRASH-2 study protocol. Contraindications will be BP greater than 90 mm Hg or time > 3 hours from trauma. Will include IFT cases. Cases will get immediate review within 24 hours. IRB approval from Arrowhead Medical Center, still awaiting Loma Linda approval. Hoping to do about 250 cases (around 5 per month). Trial study recommended for approval by unanimous vote of committee (Rudnick, Brown, Squire, Luoto, Gilbert).</p>	
EMDAC Meeting		
Announcements	<p>EMDAC website up and running. It has a section on dysfunction of 911 with wireless communications. Nominating committee is putting together a slate of officers which will be presented at the next meeting. May minutes were approved.</p>	
Treasurer’s Report	Karl Sporer reported that we have approximately \$11,000 collection from dues this year, an all-time high.	
EMSA Report (Smiley)	<p>Legislation: AB 1598 (active shooter) was enrolled but no action by governor yet. AB 2610 (Emergency management disaster committee) was passed but governor vetoed. AB 1621 (Data and IS) died. AB 2536 (Calmat Disaster Volunteers protection for employers) passed. SB 388 (investigations) and SB 556 (Employee ID) enrolled but no action yet from governor. SB 1266 – Epi autointectors – enrolled and signed. SB 1438 (naloxone) enrolled but no action yet by governor.</p> <p>Federal block grants: EMSA has received notice of award of monies but exact amount of extra money yet to be determined. It is hoped that local assistance grants will be available, and hope to know in the near future. These grants will be focused on data, HIE, and quality improvement issues.</p> <p>EMS Systems Regulations (Chapter 13): Hope to have a meeting by the end of September or early October and will release a document to leadership of various groups for feedback.</p> <p>Community Paramedic Pilot Projects: Awaiting OSHPD recommendation.</p> <p>Epinephrine Auto-Injector Regulations: With passage of bill will need to be putting together regulations for this.</p> <p>Public Safety Regulations: On commission agenda tomorrow. There has been a lot of feedback from the law enforcement community. Regs require 21 hours of training, including AED, and additional items can be added (oxygen, naloxone, nerve agents) with LEMSA approval.</p> <p>Disaster Preparedness Evaluation: EMSA and CDPH looking at levels of preparedness given that hospital preparedness funding has been significantly reduced. There is some question as to whether the funding for the mobile field hospital can be maintained past June 2015.</p> <p>HIE Summit: November 17-19 in Los Angeles. First day is a “Boot Camp.”</p>	

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Committee Reports	EMS Commission: Public safety regs going to commission tomorrow. Appeals process for issue concerning EOA in Kern County – unsure whether the commission will use an administrative law judge. There is a lot of concern about handling of RFP’s, due to Butte decision in 2010 that states LEMSA cannot delegate RFP management, which also affects an issue in San Diego County. At issue is the way due process is managed.	
Medical Advisory Committee	No report.	
Legislative Report (Sporer)	Once the naloxone regulations are done, peace officers will have to follow training. The hope is that regs can be in place by January 1 when the bill goes into effect. Ken Miller and Atilla Under will assist on the training standard.	
Cal-ACEP (Sporer)	Cal-ACEP mostly consumed with fighting Prop 46.	
State Trauma Advisory Committee (Barger)	The Trauma plan comments are in and revisions are being made, with preparation for another round of public comment. The plan mentions the need for sustainable funding.	
Community Paramedicine	Kent Benedict has retired and EMDAC needs a volunteer for this. Awaiting OSHPD response – expected in November.	
EMS for Children (Stratton)	The annual EMSC conference is November 6 in Sacramento. Fluid resuscitation and spinal immobilization are among the topics being discussed. Pediatric guidelines are on the EMDAC website.	
Tactical (Ronay)	There have been some meetings between stakeholders, working toward interactions of law enforcement and fire in tactical situations. Want to set up training for everyday type situations, and the “violent multicasualty incident” with integration of EMS in the warm zone.	
Aeromedical Issue (Duncan)	Awaiting ruling on EOA issues related to Kern and FAA regulations.	
Other Business EMS response to Residential Care Facilities	Jay Goldman discussed an issue relating to the potential that facilities could seek a waiver through Social Services to avoid use of 911. This has not been approved yet though there are apparently several applications for waiver in the Sacramento area. Currently these facilities must call 911 when there is a “change in condition” which is in direct conflict with POLST. Social Services has apparently been resistant to consideration of change in approach.	
NAMESP Chapter (Brown)	The issue of dues collection is not a factor, and NAEMSP is very interested in having us as a chapter. The costs they were trying to cover by charging fees were the development of an organization, which we already have. We would not get CE benefits. The EMDAC executive board will be discussing. We may have a room available at the New Orleans meeting in January.	
Trauma Quality Meetings	Joe Barger asked the group about the nature of discussions at trauma quality meetings. A number of different approaches were mentioned, including using the meeting to better engage facilities that transfer to trauma centers. Many stated they have been trying to evolve from the old-style processes that now are somewhat redundant in systems using ACS verification.	
Specialty Center Standardization	Renee Hsia is creating a survey to collect data from LEMSAs to see what each LEMSA is doing with regard to specialty care centers (e.g. STEMI). Still a work in progress but will share with EMDAC before sending out the survey.	Renee will attend the December meeting to discuss.

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TXA (Duncan)	Dave Duncan briefly discussed his findings in his study of TXA which will be presented at the AMTC meeting in Nashville.	
Ebola	Currently not much interest in addressing Ebola questioning at dispatch but see this outbreak as an opportunity to review general measures needed to protect personnel from infectious disease.	
Roundtable	<p>Dustin Ballard (Marin) – have changed spinal motion restriction with reduction of backboard use by 75%. Having discussions about mandating flu vaccine.</p> <p>Aaron Bair (Solano) – Adding Bougie. Currently do not have a great QI process for airway.</p> <p>David Barnes (Yolo) – new LEMSA medical director.</p> <p>Troy Falck (Sierra-Sac) – Asked about IT clamp – not currently in EMT scope as discussed at prior meeting.</p> <p>Ken Miller (Orange) – Looking forward to alternative destination study as part of community paramedicine pilot.</p> <p>Bruce Haynes (San Diego) – have used Narcan 5 times by law enforcement with one use in a case with CPR. Working with the Border Patrol on scope of practice – interested in IO and pain relief. Looking forward to amiodarone versus lidocaine versus no antiarrhythmic study now in process.</p> <p>Atila Uner (REACH) – Working with pediatric critical care transport with WestMed Ambulance. Plan to open bases in Rancho Cordova and Willets.</p> <p>David Chase (Ventura) – Looking at outcomes with resuscitation. Now see survival over 50% it witnessed VF arrests. The Air Q study will start later this year.</p> <p>Reza Vaezazizi (ICEMA) – Hosted webinar with Dan Davis – looking to have a multi-agency organized approach to resuscitation. Transitioning to Fentanyl, with some anxiety about diversion. In their stroke system, have abandoned comprehensive center triage because of lack of coverage by interventionists – will do rapid re-triage from Primary Stroke Centers.</p> <p>Dave Duncan (CALSTAR) – mentioned that they have started using AirQ on scene with RSI and placing definitive airway en route with significant reduction of scene time. One failure out of 300 cases – all cases get Zofran and Rocuronium.</p> <p>Senai Kidane (Paramedics Plus/Alameda) – Working on a project with hospitals around C. diff.</p> <p>Jim Stubblefield (Monterey) – Allowing pain control without base contact. Trauma center politics are playing out but anticipate that Natividad will be authorized to start on January 5. Patients will be directed to that center starting in October to work out kinds.</p> <p>Eric Rudnick (Nor-Cal) – Dealing with EOA and Fentanyl. In Santa Clara, there has been pressure to have tiered stroke system.</p> <p>Bill Koenig (LA) – looking at overtriage to specialty centers.</p> <p>John Brown (SF) – There have been problems with ambulance system staffing as the department does not have a system status management plan. More negative publicity likely coming, but hope for improvements in the future. San Francisco Paramedic Association went out of business 3 months ago and EMT training is now being held at USF. UCSF Mission Bay is coming on line in February 2015.</p>	
Adjournment	Next Meeting in San Francisco on December 2 at Marines Memorial Hotel.	