

EMS Leadership Call Minutes 7/10/2019

Attendance: Dan Batsie, Dan Wolfson, Ray Walker, Chelsea Dubie, Stephanie Busch, Jamie Benson, Donna Jacob

Dan B. opened the meeting by thanking them for adjusting the call away from July 4th and hoping everyone had an enjoyable holiday.

Data – Chelsea

- Back from maternity leave and getting caught up. Thanks for patience.
- Continue using siren@vermont.gov for support requests.
- One of the data managers has been extended for 3 months to assist.
- Couple cool reports have been built and lots of good work done.

Licensing – Ray

- All personnel except EMRs expired June 30. Contact the National Registry directly if issues.
- Agency license renewal applications went out in the mail this week. Since the new electronic system is not ready, we're again dealing with paper and ink renewals.
- Ambulance inspections for the odd-numbered districts began in June.

Medical Director – Dan W.

- Protocol work continues. Next meeting is this afternoon. Input to the protocol changes is welcomed from any of the many possible routes.
- Last regional meeting was in Bennington Monday evening; next one is in Newport on August 12 at 6 p.m.
- If services are experiencing a ketamine shortage for behavioral emergencies, and cannot get the 100 mg/mL dosing, do NOT use the 50 mg/mL dosing for IM. Use halidol or another option for behavioral emergencies.
- HPCPR efforts continue around the state. Chris McCarthy, Keith Hermiz and about 30 highly-trained pod leaders have been busy. Contact our office to run a course. Areas using HPCPR have seen a 50% increase in survival.
- HPCPR is being added to protocols in 2020. By the end of 2020, it will be mandatory.
- When asked, Dan B. said he did not yet know what effect HPCPR would have on psychomotor testing.

Occupant/Pedestrian Safety/Naloxone – Stephanie

- The EMS office is working on a new protocol, the Naloxone Leave Behind Overdose Rescue Kit program (Naloxone Leave Behind Kit for short) to address the growing concern of the opioid crisis in VT. The program is working to get naloxone, harm reduction/treatment resources into the hands of patients that are at increased risk of overdosing. This protocol focuses on two at-risk patient types we see in the field.
 - 1) When EMS crews respond to overdoses with patients refusing transport (EMS is still expected to encourage ED transport).
 - 2) When EMS crews respond to calls for patients who are struggling with opioid use/ Opioid Use Disorder.

We will be reaching out to services about the protocol rollout, supplies and training.

- Questions and requests for all naloxone refills should be sent to our centralized email naloxone@vermont.gov
- Dan B. explained that leave behind situations like an OD refusal are an obvious situation where a kit can be left behind. However, a call for an asthma attack for a patient who is at risk is also an opportunity. Scene assessment and judgement will be required. The goal is harm reduction.
- A video will also be released to help broach the subject with patients or family members.
- Dan B. reminded providers that once reversed, an OD patient is now in complete, full-blown withdrawal. They'll want to use again; therefore, this leave-behind kit program is a life-saving option.

Training – Dan B.

- Course instructors will have to focus more heavily on the role of testing. Working with the district on testing will still be required, but a conversation with the instructor(s) about testing will be initiated by Dan B. going forward.
- State Training Coordinator position has been offered and we're awaiting an answer/ negotiations. Hoping for news in next 2 weeks.

EMSC – Merrill

- Hoping to get a Pediatric Emergency Care Coordinator (PECC) class up and running both in hospital and prehospital settings. Currently working with hospitals and then will shift focus to providers. PECC-trained individuals can then bring training back to their peers.
- Working on a pediatric safety initiative similar to HeartSAFE—creating best practices for towns and residents to become a pediatric-safe community.
- Pediatric care data will be released soon.

General – Dan B.

- Nitronox: An email will go out later today describing an incident with a Porter Parker Nitronox delivery device that failed (exploded), causing injuries. The manufacturer has no explanation and is investigating. All devices are to be quarantined.
- Conference: Couple excellent keynote presenters have been lined up. There is also a good possibility that a SIM track will be offered at UVM, with a slight (\$30-\$35) cost to cover the lab and transportation. Also a series of scenario stations with openings for teams of students to run through. Folks asked for more hands-on...here it is.
- Special fund grants have only been enacted by 4 of the 13 districts. Only 2 forms are required to complete the paperwork, and we'd love to hand out funds.

Meeting adjourned 11:24 a.m.