

Subject to Corrections and Committee Approval  
**MARQUETTE COUNTY EMERGENCY MEDICAL SERVICES  
 MEDICAL CONTROL AUTHORITY**

**MINUTES**

**Tuesday, July 7, 2009**

**6 p.m.**

**MGHS  
 Conference Room 4**

ATTENDANCE: See Attachment

STAFF PRESENT: Lyn Nelson

*Marquette County EMS Medical Control Authority meetings are open to the general public, and are subject to the requirements of Public Act 267 of 1976, as amended on March 31, 1977, also known as the Open Meetings Act. Annual meeting schedules are posted at the principal office site, as required, and minutes are available upon request.*

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AGENDA ITEM	DISCUSSION/RECOMMENDATION/CONCLUSION	ACTION TAKEN
<b>A. Call to Order</b>	Dan Wolf called the meeting to order at 6:00 p.m.	
<b>B. Introductions</b>	Those in attendance introduced themselves.	
<b>C. Approval of Meeting Agenda – July 7, 2009</b>	Dan Wolf asked for approval of the meeting agenda for July 7, 2009.	<b>Motion by Gary Vargo, second by David Guizzetti to approve the agenda. Motion carried.</b>
<b>D. Approval of Meeting Minutes - January 6, 2009</b>	Dan Wolf asked for approval of the meeting minutes from May 5, 2009.	<b>Motion by David Guizzetti, second by Randy Makela to approve the minutes of 5/5/09. Motion carried.</b>
<b>E. Public Comment</b>	None.	
<b>F. Action Items</b>		

<p>1. Advisory Board Member Appointments</p>	<p>Ely Township requests that Carl Hosang be on the MCA Board as he is their MFR agency's new agency director.</p>	<p><b>Motion by David Guizzetti, second by Gary Vargo to approve Carl Hosang as representative for Ely Township MFRs. Motion carried.</b></p>
<p>2. MCA Annual Meeting</p>	<p>June 14-15. The state was advised when they scheduled this Medical Control Seminar in the spring with short notice (it is usually in the fall), that many persons involved with the Central Division Exercise would not be in attendance. Dennis Karuzas attended the meeting and provided his comments and a protocol CD to Lyn upon his return. The national education standards involved accreditation requirements per the National Registry. At this time, Michigan is preparing to remove itself from all of the National Registry movement because many of its training centers would not be able to accomplish accreditation for their programs. This may require the state to go back to its own testing programs. No updates on strike teams for EMS. There is a person in the eastern U.P. that is spearheading strike teams in EMS for Region 8 as this is a state-wide initiative. He is trying to get a hold of Robin at the state for it has been a long time since her office has advised him of any updates and the last he knew everything was in draft form. Region 8 may be sending out updated information on MedRun, ChemPak and H1N1. Regarding the state's EMS Information System, your packet includes correspondence from the state explaining why the specific data fields were chosen for inclusion in ImageTrend. This document also provides explanation on why the MCA access was taken away. We were acknowledged to be a model MCA here in that we were working collectively with all of the agencies and already had a PSRO policy in place that included electronic patient care reports. This was deemed not good enough by the state EMS office and thus Kevin Putman, EMS Information System Coordinator, was required to turn off the MCA access here. We now must author an additional confidentiality protocol and submit that to the state. Lyn is emailing the state EMS office daily to obtain the confidentiality protocol. Another item Dennis indicated was spoke about at the conference is audit findings. He related the state is finding personnel applying or renewing that have criminal convictions making them no longer eligible for a license. There are many persons renewing for licenses that do not have the required educational credits. Additionally, the state is finding that agencies do not have all of the items their agency license requires them to have (e.g. orientation procedures, safety policies, training). It is unknown if the agency problem is being found when the state inspections occur or if the state is spot checking agencies after this has occurred. Regarding personnel licenses, that is being found at the state level. Gary Vargo asked if I find out from the state</p>	<p><b>Follow up with the state on the "model" confidentiality protocol as they referenced it should have already been distributed to the MCAs.</b></p>



<p>3. Bell &amp; MGHS ED Interaction</p>	<p>David Guizzetti indicated there seems to be better relations with the ED staff since we started communicating about this item at the MCA meetings. Lisa Mills said she sent an email to Don Manty and Central Dispatch regarding a new route they will be taking for their patients. Unless the patient is at the Empire Mine, their new route will take them on M-35 northbound to County Road 480 westbound, through Negaunee City on Main St/Teal Lake and then US-41 when going to Bell. It is a much better road for patient comfort. Tabitha said a couple of weeks ago they had a transport to Bell and were unable to get the door open to the EMS receiving garage. They called the Range number and it did not work. They were unable to arouse Bell EMS staff. An ED employee let them in, but the rigs were in the bays. We have spoke on this issue at prior MCA meetings. If all else fails, it was suggested persons could go through the front door of the ED, especially if patient condition requires immediate ED delivery. Dan was asked to bring up the following issue by security and that is a continued problem with supplies walking away from the ED, EMS office off the ED. Upon further questioning, Dan said they were gloves in the EMS office off the ED that Security must use for certain floors at the hospital. Cheryl keeps tabs on the rest of the supplies and she said there has not been a problem, not even with the laundry. Jackie Adair stated that today she brought back many large boxes of linen from Eastwood Nursing Home. Cheryl re-iterated the laundry issue has subsided. David Guizzetti said his staff has been having difficulties with parking in the MGHS ED garage because of rigs that pull straight in and do not angle park. He said the garage is very tight already. Sometimes it is appropriate to unload, then pull your ambulance out the other side and off to the side. As the boxes and rigs keep getting bigger, we will only continue to experience more problems with this tight area.</p>	<p><b>Lyn will advise Barbara Larson there are still problems with agencies getting access to the EMS receiving bay at Bell.</b></p> <p><b>Please bring back to your staff that supplies in the EMS office off the ED are there for Security's use.</b></p> <p><b>Please bring back to your staff to angle park in the MGHS ED garage.</b></p>
<p>4. MI-HAN Alert</p>	<p>A medium level MI-HAN was sent out a week ago. Joshua has been sending them out also. Information such as H1N1 updates will be sent via MI-HAN.</p>	



acting out the process than EMS - suggested in the future that EMS actually not be in simulation mode so we can test our supplies, what works or doesn't and identify needs; patient tracking was done manually with the triage tags; the fire departments were the only agency with personnel accountability; the fire departments exercised using SCBAs – it was discovered that if they had been using the air, we would have had logistical problems with a hazmat scene changing them out and extra physical effort, along with the difficulty of patients understanding what they were saying and radio communicating. Formal after action review will occur on July 15. According to PSRO reviews, the EZIO is being used more often and also in cardiac arrest situations. The first use of the humerus in Marquette County during an arrest occurred and went nicely. There is a slight increase in people requesting pain management, not waiting for the ED staff to suggest it, and also some are proactively requesting the use of Phenergan as that is the only anti-emetic in the drug box. Respiratory calls need respiratory documentation. Spinal motion restriction – document why you did not do it for calls that read as though you normally would. The first documentation of keeping trauma patients warm through various methods occurred throughout the last couple of months. Part of the Strategic National Stockpile was delivered to Region 8 as part of H1N1 response. It is anticipated that the flu will come back this fall. Collaboration has begun between the MCA office and the Stroke Project at MGHS.

**Remind staff that triage tags have multiple number coded stickers on them. Perfect for use during an event or multiple patients when you need to keep their belongings coded to them.**

3. Committee Reports		
<i>a. Communications Committee</i>	Committee did not meet.	
<i>b. Protocols</i>	Committee did not meet.	
<i>c. PSRO</i>	Minutes contained in packet.	
<i>d. Operations and Interagency Relations</i>	Committee did not meet.	
<i>e. Training</i>	Committee did not meet. They will elect a chair when they meet.	
<i>f. AED</i>	Committee did not meet.	
<i>g. Pharmacy</i>	Committee did not meet.	
<i>h. UP-EMS Report</i>	No one was present to report from UP-EMS.	
4. Statewide EMS Committee Report	No report.	
5. Grant Updates	No report. If there are any major changes or updates, they will be disseminated through MI-HAN.	

I. Announcements & Service Reports		
	<p>Jill Fries from Marquette County Health Department provided additional information about H1N1. Recently, it was brought to her attention that not all EMS agencies were receiving information from their office that was sent to the Emergency Departments. Jill has since formed communication links with the MCA office. Jill encouraged people to be leaders in the community and march the mission of preparedness in their own homes by making sure they can survive for days (food, water, etc.). Health Departments are expecting H1N1 to come back this fall as it is becoming more virulent and starting to effect healthy individuals. Vaccines are in trial, but these will be very limited in quantity. There will be a document on the Health Department website on things you need to do for yourself and your home.</p> <p>Lisa said Jodi McCollum will be providing a trauma presentation at Richmond in September. All are welcome to attend. She also anticipates having Jeanette Stebleton attend in the future on the topic of stroke.</p> <p>Lyn reminded everyone of the Acute Neurological Deficit Bypass Protocol and training program available on the MCA website.</p> <p>Gary Vargo requested a list of people that can do AED, CombiTube, EpiPen and Albuterol. Epi and Albuterol are once a year. AED/Combi/ASA are together every 3 or 4 months, selected by the service.</p>	<p><b>Lyn will prepare a list.</b></p>
<b>IX. Public Comment</b>	None.	
<b>IX. Adjournment</b>	The meeting was adjourned at 6:48 p.m.	<b>Motion by Mills, second by Adair. Motion carried.</b>

Respectfully Submitted,

*Lyn L. Nelson*

Lyn L. Nelson

ATTACHMENT A

May 5, 2009 Attendance

Bell Administration	absent
Bell Emergency Department	absent
Bell EMS	excused
Champion Humboldt	Jackie Adair
Cliffs	absent
Ely Township	excused
Forsyth Township	excused
Government Representative	absent
Marquette City Fire	excused
Marquette Co Central Dispatch	Gary Johnson
Marquette Co EM	excused
Marquette Co Sheriffs Rescue	excused
Marquette Co Health Department	Jill Fries
Marquette General Emergency Dept	Cheryl Moore
Marquette General EMS	Dan Wolf
Marquette General Administration	excused
Marquette Township Fire	Randy Makela
MediRide	David Guizzetti
Michigamme Spurr	absent
Negaunee Township Fire	Bridgett Marier
Powell Township	Gary Vargo
Republic EMS	Tabitha Skogman
Richmond Township	Lisa Mills
Rock	absent
Sands Township	absent
Skandia West Branch	absent
Guest	Nancy Currie