

CEMSMAC AGENDA
December 10, 2015 - 10AM

**Location: Hilton Garden Inn Milford, 291 Old Gate Lane,
Milford, Connecticut, 06460* (NOTE LOCATION CHANGE)**

DIAL IN NUMBER 866 - 421 - 2934, PASS CODE: 32437828

*****Review of Feedback from Draft Statewide EMS Protocols, 0900-1000*****

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- **Review/Approval Of Minutes From November 2015 Meeting**
 - **DPH/OEMS Report (OEMS)**
 - **Continue Review of Feedback from Draft Statewide EMS Guidelines**
 - **Potential Pilot Program For BLS Providers To Use Nebulized Albuterol (Begg)**
 - **Region V AEMT (Begg)**
 - **Regional MAC Reports – (Regional Reps)**

OTHER BUSINESS/ONGOING INITIATIVES

- **Potential Role Of Medication Pumps In Statewide Protocols (Cone)**
- **SCT Review Process Update (Gallo/Carter)**
- **Revision To State Minimum Equipment List (Mcclaine)**
- **Mobile Integrated Healthcare (Bailey/Group)**
- **Revision Of State DNR/Discontinuation Of Resus Doc (Kamin/Bailey)**
- **Potential Research Regarding Pre-Hospital Spine Injuries (Cone)**
- **EMS Destination Guidance (OEMS)**
- **CEMSMAC – Legislative Process**
- **AEMT**
- **CMED**

DRAFT MINUTES
CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS

Location: CHA, 110 Barnes Rd, Wallingford, CT

December 10, 2015

Member Attendees: Kyle McClaine, Richard Kamin, William Begg, Doug Gallo, Jim Castellone (phone) , James Parker, David Cone

OEMS Staff: John Spencer, Richard Kamin

Guests: Joe Larcheveque, Kevin Burns, David Bailey, Paul Rabeuf, Mark Cicero, Gary Herbert, Patricia Palaia, Peter Canning, Fred Rosa

Chaired By: Richard Kamin, M.D., Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the November 2015 CEMSMAC meeting were reviewed.	Motion to accept as submitted made by Dr. Cone and second by Dr. Gallo – unanimous approval.

DPH/OEMS Report	<ul style="list-style-type: none"> • EMS training coordinator position posted • EMS director position expected to follow soon 	
Regional MAC Reports (regional reps)	<ul style="list-style-type: none"> • Tabled due to time restraints 	
Needed Revisions to State Minimum Equipment List (Group)		<ul style="list-style-type: none"> • Discussion, vote and final list will be completed by March 2016 Please send comments for consideration to Dr. McClaine (kyle.mcclaine@hhchealth.org)
Statewide Unified Guidelines	<ul style="list-style-type: none"> • Majority of meeting spent reviewing comments on Draft Statewide EMS Protocols 	<ul style="list-style-type: none"> • Review to continue in January
Potential Role of Medication Pumps in Statewide Protocols (Cone)	<ul style="list-style-type: none"> • Required in other states. Not currently required in our proposed State Guidelines. All other New England states mandate. Discussion as to literature support for necessity given cost. 	<ul style="list-style-type: none"> • Will continue to discuss at next months meeting, along with rest of State Protocols

Potential Region V BLS Albuterol Pilot	<ul style="list-style-type: none"> • Desire from Sharon Hospital to address a perceived need due to lack of ALS providers 	<ul style="list-style-type: none"> • Supported by Sharon Medical Director (Santos). • Supported by Regional MAC • Discussion at CEMSMAC and request for additional information • Discussion to continue
Adjourned	<ul style="list-style-type: none"> • January CEMSMAC meeting conflicts with National Association of EMS Physicians Meeting – discussion electronically regarding potential to reschedule 	<ul style="list-style-type: none"> • Date and location of January meeting to be decided on pending availability and distributed.

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD

CEMSMAC AGENDA DRAFT

November 12, 2015 - 10AM

*****Location: CHA, 110 Barnes Rd, Wallingford, CT 06492 *****

DIAL IN NUMBER 866-421-2934, PASS CODE: 32437828

PLEASE EMAIL YOLANDA WILLIAMS IF YOU ARE GOING TO CALL IN

SCT Sub-Committee Meeting, 0900-1000

- Review/Approval of minutes from October 2015 meeting
- DPH/OEMS Report (OEMS)
- SCT Review Process Update (Gallo/Carter)
- Election of Co-Chair (Group)
- Potential research regarding pre-hospital spine injuries (Cone)
- Potential Role of Medication Pumps in Statewide Protocols (Cone)
- Revision to State Minimum Equipment list (McClaine)
- Regional MAC Reports – (Regional Reps)

OTHER BUSINESS/ONGOING INITIATIVES

- Statewide Unified Guidelines
- CEMSMAC – Legislative Process
- Mobile Integrated Healthcare (Bailey/group)
- Revision of State DNR/Discontinuation of Resus Doc (Kamin/Bailey)
- EMS Destination Guidance (OEMS)
- AEMT
- CMED

DRAFT MINUTES
CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS

Location: CHA, 110 Barnes Rd, Wallingford, CT

November 12, 2015 - 10AM

Member Attendees: Kyle McClaine, Richard Kamin, William Begg, Doug Gallo, Jim Castellone , James Parker, David Cone

OEMS Staff: Wendy Furniss, John Spencer, Richard Kamin

Guests: Joe Larcheveque, Ryan Carter, Jim Santacroce, Mike Zanker, Kevin Burns, David Bailey, Glenn Arremony, Nancy Brunet,, Paul Rabeuf, Mark Cicero

Chaired By: Richard Kamin, M.D., Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the October 2015 CEMSMAC meeting were reviewed.	Motion to accept as submitted made by Dr. Cone and second by Dr. Gallo – unanimous approval.

<p>DPH/OEMS Report</p>	<ul style="list-style-type: none"> • EMS training coordinator position posted, EMS director position expected to follow soon • EMS instructors <ul style="list-style-type: none"> ○ Hold on new instructor applications (700 total in CT) ○ Training Standards and criteria are being reviewed ○ Mechanism for state to assess updated content and delivery consistency 	
<p>SCT Review Process Update (Gallo/Carter)</p>	<ul style="list-style-type: none"> • Process ongoing. Basic formulary and educational content goals have been reviewed and updated. • Information given to Education and Training committee to review and assist with training program formulation. • Ongoing CEMSMAC initiative to develop expectations and assess support for SCT level provider. • Goal of more widespread acceptance and implementation with this SCT version. • Discussed: <ul style="list-style-type: none"> • SCT Training standards • Skill sets above paramedic to be codified • Just in time training for newer meds, etc 	

	<ul style="list-style-type: none"> • Medical Director has final call on specific SCT medication and standard questions while we are updating the SCT program. 	
Election of Co-Chair (Group)	<ul style="list-style-type: none"> • Nominations from the floor called for – no further nominations returned 	<ul style="list-style-type: none"> • Kyle McClaine re-elected (Kamin, Cone, Unanimous)
CEMSMAC involvement with legislative process (McClaine)	<ul style="list-style-type: none"> • Consider submitting possible proposals. • Speak to your local reps, as your influence on their vote matters. • Medical directors play key role in influencing public health initiatives. 	
Regional MAC Reports (regional reps)	<ul style="list-style-type: none"> • Region I: <i>Gallo</i>: CSpine/ SCT/ Min Equip list to be discussed Nov 18 • Region II: <i>Cone</i>: State wide protocol feedback discussed. Only Yale responded. Individual medical directors giving feedback to Cone in absence of meeting, Submitted to CEMSMAC • Region III: <i>Bailey</i>: guidelines reviewed, list submitted to CEMSMAC • Region IV: <i>McClaine</i>: Guidelines reviewed and proposed list submitted to CEMSMAC • Region V Begg: Next Region V meeting November 19th <ul style="list-style-type: none"> ○ Trauma Guidelines and prehospital activation opportunities ○ State guidelines protocol draft sent to Region V for review & sent back to CEMSMAC 	

<p>Potential research regarding pre-hospital spine injuries (Cone)</p>	<ul style="list-style-type: none"> ○ AEMT: WCHN open forum meeting set for December 2nd with all WCHN AEMT providers ● Reviewed draft proposal for Retrospective analysis of all traumatic spine fractures managed in CT hospitals since SMR guideline adoption Nov 2014. ● Attempt to determine how EMS extrication, movement, and transport was conducted, and any subsequent clinical effects. ● No attempt to scrutinize cases for provider error, rather to examine the SMR guideline for safety and efficacy. ● Data will be secured through Yale IRB, reported in aggregate, will not identify individual hospitals or EMS agencies 	<ul style="list-style-type: none"> ● Regions are asked to participate which will include collecting their own data to submit. ● Need EMS ePCR, ED Record, Discharge summary, Final diagnoses related to spine
<p>Needed Revisions to State Minimum Equipment List (Group)</p>	<ul style="list-style-type: none"> ● Please review with regional MACs and individual services. 	<ul style="list-style-type: none"> ● Discussion, vote and final list will be completed by March 2016 ● Please send comments for consideration to Dr. McClaine (kyle.mcclaine@hhchealth.org)

Revision of State DNR/Discontinuation of Resuscitation Doc (Kamin/Bailey)	<ul style="list-style-type: none"> • Tabled 	<ul style="list-style-type: none"> • Will remain on agenda
Statewide Unified Guidelines	<ul style="list-style-type: none"> • Draft distributed to CEMSMAC Regional Representatives 	<ul style="list-style-type: none"> • Plan for 60 day review then back to the CEMSMAC at December meeting for any needed changes
CMED	<ul style="list-style-type: none"> • Tabled 	<ul style="list-style-type: none"> • To remain on the agenda • Discussion re potential utility to write up Region II experience for historical perspective
EMS Destination Guidelines	<ul style="list-style-type: none"> • Awaiting clarification of legality of restriction on patient autonomy from DPH 	<ul style="list-style-type: none"> • Will remain on agenda
Potential Role of Medication Pumps in Statewide Protocols (Cone)	<ul style="list-style-type: none"> • Required in other states. Not currently required in our proposed State Guidelines. All other New England states mandate. • Discussion as to literature support for necessity given cost. 	<ul style="list-style-type: none"> • Will continue to discuss at next months meeting, along with rest of State Guidelines.
<ul style="list-style-type: none"> • State \$ cuts and impact on EMS: 	<ul style="list-style-type: none"> • Discussion 	<ul style="list-style-type: none"> • Continue to pressure your local elected reps to act.
<ul style="list-style-type: none"> • Mobile Integrated Healthcare (Bailey/group) 	<ul style="list-style-type: none"> • Waiting for further direction from DSS & state. • Discussed utility of restarting meetings to draft expected requests. 	<ul style="list-style-type: none"> •

<ul style="list-style-type: none">• AEMT	<ul style="list-style-type: none">• Await Reg V & WCHN meetings later this month	<ul style="list-style-type: none">• Update at Dec CEMSMAC
Adjourned	<ul style="list-style-type: none">• Next CEMSMAC meeting is scheduled for November 10, 2015 @ 10:00 am.	

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD

CEMSMAC AGENDA DRAFT

October 8, 2015 - 10AM

*****Location: AHA, 5 Brookside Dr, Wallingford, CT 06492*****

DIAL IN NUMBER 866-421-2934, PASS CODE: 32437828

PLEASE EMAIL YOLANDA WILLIAMS IF YOU ARE GOING TO CALL IN

SCT Sub-Committee Meeting, 0900-1000

- Review/Approval of minutes from September 2015 meeting
- DPH/OEMS Report (OEMS)
 - Data Report Release
 - MIH Update
 - Stroke Task Force
 - EMS Destination Guidance
- SCT Review Process Update (Gallo/Carter)
- Election of Co-Chair (election to be held in November)
- Potential research regarding pre-hospital spine injuries (Cone)
- Revision to State Minimum Equipment list (Group)
- Revision of State DNR/Discontinuation of Resuscitation Doc (Group/Bailey)
- Potential Change to EMT Scope of Practice – IM Injections (McClaine)
- EMS Destination Guidance (Zanker issue on intoxicants)
- Call for legislative session requests, proactive planning (McClaine)
- Regional MAC Reports – (Regional Reps)

OTHER BUSINESS/ONGOING INITIATIVES

- Statewide Unified Guidelines
- SMART Tag Training
- Mobile Integrated Healthcare (Bailey/group)
- AEMT
- CMED

DRAFT MINUTES
CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS

Location: AHA, 5 Brookside Dr, Wallingford, CT 06492
October 8, 2015

Member Attendees: Kyle McClaine, Richard Kamin, William Begg, Doug Gallo, Jim Castellone (phone), James Parker, David Cone

OEMS Staff: Wendy Furniss, John Spencer, Richard Kamin

Guests: Fred Rosa, Joe Larcheveque, Ryan Carter, Jesse Bohrer-Clancy, Jim Santacroce, Mike Zanker, Kevin Burns, David Bailey,
Glenn Arremony, Patti Palaia, Ralf Coler, Nancy Brunet, Valerie Cassidy, Paul Rabeuf

Chaired By: Richard Kamin, M.D., and Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the June 2015 CEMSMAC meeting were reviewed.	Motion to accept as submitted made by Dr. Cone and second by Dr. Parker – unanimous approval.

<p>DPH/OEMS Report</p>	<ul style="list-style-type: none"> • State EMS Data Report Released • MIH Update <ul style="list-style-type: none"> ○ As discussed at EMSAB – DSS to lead study – DSS Contact provided • Stroke Task Force <ul style="list-style-type: none"> ○ Draft CT Unified Stroke Protocol distributed to Task Force for discussion • EMS Destination Guidance <ul style="list-style-type: none"> ○ Discussion at OEMS regarding what authority does or does not exist to direct destination guidance. ○ Begg – interest from ED directors <ul style="list-style-type: none"> ▪ Do intoxicants even need ED? ▪ Should you leave the catchment area with any patient? ▪ Intoxicants, special needs, etc • Five year State EMS Plan released from DPH <ul style="list-style-type: none"> ○ To be distributed 	<ul style="list-style-type: none"> • Once authority clarified from OEMS will be better able to move forward with drafting of guidance document
<p>SCT Medication Issue/Overall SCT discussion (Group)</p>	<ul style="list-style-type: none"> • Meeting this am from 0900 – 1000 • Attended by McClaine, Palaia, Larcheveque, Gallo, Carter, Burns, Brunet, Rosa, Rabeuf, 	<ul style="list-style-type: none"> • Will further develop: Training, Scope of Practice, Guidelines for SCT • Will hold discussion with education

	Cassidy, Kamin	<p>committee regarding changes in training needed</p> <ul style="list-style-type: none"> • Question need for statewide certification and educational standard/T1 • Will continue to meet before CEMSMAC
Potential Change to EMT Scope of Practice – IM Injections (McClaine)	<ul style="list-style-type: none"> • Consideration for Epinephrine for anaphylaxis and naloxone for opiate overdose • Cost of Epi pen drives consideration of change in scope of practice • Statute defines EMT using auto-injector – IM injections currently outside the EMT Scope of Practice • 18 dollar IM Injection kit available from local vendor (dramatically less expensive than auto-injector) • Region I – considered and rejected EMT IM injections due to safety, dosing concerns 	<ul style="list-style-type: none"> • Question from OEMS (Furniss): <ul style="list-style-type: none"> ○ How often is epi/naloxone being given to clarify need for change in intervention/scope? ○ Parker – clarifies that frequency may not be as important as cost of intervention if limited to auto-injector • Begg - Question utility of pilot program like EKG for BLS? • Group urged to contact representatives and Governor to address cost of medication • McClaine to bring discussion back to regional MAC then update the CEMSMAC if any further interest in moving forward
CEMSMAC involvement with legislative process (McClaine)	<ul style="list-style-type: none"> • Call for legislative session requests and a more proactive approach regarding legislative issues 	<ul style="list-style-type: none"> • Need for dedicated EMS funding re-identified as priority. • Group urged to bring ideas for needed

		<p>legislative change to meeting.</p> <ul style="list-style-type: none"> • Group reminded that EMSAB Legislative Committee Chair position open
<p>Regional MAC Reports (regional reps)</p>	<ul style="list-style-type: none"> • I <ul style="list-style-type: none"> ○ Met Sept 17 th ○ Meet every other month, third Thursday (next is Nov 19th) ○ Unified guidelines distributed ○ AEMT – Support till 2017 then sunset, no new scope courses ○ SMART tags – considering greater practicality of multi-color ribbon system in event initially. ○ No support for EMT IM injections ○ Nor-epi peripheral access accepted • II <ul style="list-style-type: none"> ○ No MAC ○ However interest from Clinical Coordinators to meet over Draft Unified Guidelines • III – nothing to report – meeting next week • IV 	

- Review draft guidelines
- V
 - Early sept last meeting
 - Next is upcoming
 - Guidelines distributed – fielding feedback
 - AEMT
 - 5 AEMT services out of Danbury Hospital
 - Productive Meeting with supervisors from affected services
 - 300-400 hours additional training
 - Cost/time prohibitive for the 5 services to upgrade
 - Next step is to have open forum with AEMT providers
 - Question need to embrace CPAP for BLS
 - Question need for BLS beta-agonists (would require change in EMT Scope of Practice)

	<ul style="list-style-type: none"> ○ Question need for IV capable EMT providers (to allow IV skill maintenance) ○ Recognize important commitment and service Region's AEMT have made 	
Needed Revisions to State Minimum Equipment List (Group)	<ul style="list-style-type: none"> ● Request to group to bring changes to consider back to CEMSMAC 	<ul style="list-style-type: none"> ● Will remain on agenda ● Please send comments for consideration to Dr. McClaine (kyle.mcclaine@hhchealth.org)
Revision of State DNR/Discontinuation of Resuscitation Doc (Kamin/Bailey)	<ul style="list-style-type: none"> ● Current document is from 2010 and in potential need of revision 	<ul style="list-style-type: none"> ● Will remain on agenda
Statewide Unified Guidelines	<ul style="list-style-type: none"> ● Draft distributed to CEMSMAC Regional Representatives 	<ul style="list-style-type: none"> ● Plan for 60 day review then back to the CEMSMAC for any needed changes
CMED	<ul style="list-style-type: none"> ● Fragmented performance in Region II continues 	<ul style="list-style-type: none"> ● To remain on the agenda ● Discussion re potential utility to write up Region II experience for historical perspective
EMS Destination Guidelines	<ul style="list-style-type: none"> ● As above in DPH report 	<ul style="list-style-type: none"> ● Will remain on agenda

Adjourned	<ul style="list-style-type: none">• Next CEMSMAC meeting is scheduled for November 12, 2015 @ 10:00 am.	
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Respectfully submitted: Richard Kamin MD, Kyle McClaine MD

DRAFT

CEMSMAC AGENDA

September 10, 2015 - 10AM

Location: CHA, 110 Barnes Road, Wallingford, CT 06492

DIAL IN NUMBER 866-421-2934, PASS CODE: 32437828

PLEASE EMAIL YOLANDA WILLIAMS IF YOU ARE GOING TO CALL IN

THERE WILL BE A SCT SUB-GROUP MEETING AT 0900 TILL 1000

- Review/Approval of minutes from May 2015 meeting
- DPH/OEMS Report (OEMS)
- SCT Review Process Update (Gallo/Carter)
- Potential research regarding pre-hospital spine injuries (Cone)
- Ongoing Sponsor Hospital Support of AEMT (Kamin)
- Zanker issue on intoxicants/EMS Destination Guidelines
- Regional MAC Reports – (Regional Reps)

OTHER BUSINESS/ONGOING INITIATIVES

- Statewide Unified Guidelines
- SMART Tag Training
- Mobile Integrated Healthcare (Bailey)
- CMED

DRAFT
CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS

Location: AHA, 5 Brookside Dr, Wallingford, CT 06492
September 10, 2015
MINUTES

Member Attendees: Kyle McClaine, Richard Kamin, William Begg, Doug Gallo, Jim Castellone, James Parker, Dave Cone

OEMS Staff:

Guests: Mike Zanker, Kevin Burns, David Bailey, Patti Palaie, Ralf Coler, Nancy Brunet

Chaired By: Richard Kamin, M.D., and Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the June 2015 CEMSMAC meeting were reviewed.	Motion to accept as submitted made by Dr. Castellone and second by Dr. Cone – unanimous approval.

<p>DPH/OEMS Report</p>	<ul style="list-style-type: none"> • No formal report given or submitted • Question from Region IV regarding future of MIH in CT and how DSS/DPH study will proceed. • How can an entity get involved • How can the EMSAB MIH Sub-Group support/assist 	<p>Questions re MIH to be posed back to OEMS</p>
<p>SCT Medication Issue/Overall SCT discussion (Group)</p>	<ul style="list-style-type: none"> • Review finished on formulary • Next step is to move desired changes to education committee • Discussion regarding need to continue to develop process/structure in state for SCT/critical care • Need to develop data/registry so that we know where we are • Need to define SCT so that practice can be built <ul style="list-style-type: none"> ○ Zanker – need to set up floor as well as process to amend. 	<ul style="list-style-type: none"> • Will continue to develop SCT process/structure within sub-group of CEMSMAC • Will continue to meet before CEMSMAC

<p>Ongoing Sponsor Hospital Support of AEMT (Kamin)</p>	<ul style="list-style-type: none"> • Coler - Educational “packet” for AEMT already developed at federal level • Work needs to be done at state to better define how training is held/validated 	<ul style="list-style-type: none"> • From survey done via regions there was a general lack of intent to continue to provide oversight to AEMT level services • Formal report from survey pending • Region V – Danbury – 4-5 AEMT services – plan to coordinate with 5 AEMT services and have discussion regarding moving forward. They are willing to consider support of the AEMT if initial and ongoing education is ensured
<p>Regional MAC Reports (regional reps)</p>	<p>Region I – Met in July</p> <ul style="list-style-type: none"> • Mission Lifeline presented • AEMT – general lack of support due to CME need moving forward • Questions regarding how to deviate/alter from statewide guidelines once in place • SCT revision/implementation ongoing • Next meeting - 9/17/2015, noon, Weston Fire Station 2, 2nd floor: 234 Lyons Plain Rd, Weston, CT <p>Region II – MAC not meeting in face of ongoing regional council meeting though</p>	

Region III

- Behavioral emergency guideline discussed
 - No changes to guideline at this point
 - Supported involving police to better develop policy
- BLS downgrade
- Naloxone guideline
 - Updated to formally include BLS providers
- Discussed iv and IN dosing
- Nor epi as substitute for dopamine
- Need for changes to state EMS DNR doc

Region IV

- New EMS Med director at L&M –Dr Cronin
- New Trauma and EMS Coordinator at Backus-Rene Malaro
- Review of min equipment list –concern regarding syringe counts, Morgan lens requirement (no services in region 4 use)
- NECOG study ongoing – analysis of EMS system in Northeast CT –all levels of service
 - Survey sent out to all agencies and Sponsor hospitals
 - Onsite interviews and analysis
 - Report due back with recommendations within next several months

Region IV:

- BLS IM Med proposal
 - Epi pen autoinjectors currently \$300 or more, up from \$75 five years ago. Narcan autoinjector \$400.
 - Cost of simple kit with ampule of meds], IM needle and small syringe approx \$20.
 - Should we propose change in scope of practice to allow BLS IM Epi, Narcan?

Region V

- AEMT Discussion
 - Relevant for 5 services in Region V all within WCHN.
 - WCHN would support providing oversight and would endorse services that had acceptable proposals on educational timeline, but WCHN would not condone outsourcing of AEMT education to questionable services.
 - Oct meeting scheduled for affected parties to determine if Region V will sunset AEMT or attempt to move to 2009 level of training
- Discussion re Albuterol use by EMT
 - For trial of use of nebulized albuterol by Basic EMS personnel
 - Proposal for scope of practice change will be presented to CEMSMAC at later date.
- Medications being reviewed in Region V: Nitro /

	<p>Midazolam / Hydralazine / Fentanyl/ Albuterol/ Ativan vs Valium vs Versed as a newer option</p> <ul style="list-style-type: none"> • Revised the procedural guidelines for Selective Spinal Immobilization (it was duplicated in two different sections of the protocols) • Medication reference sheet for IV drips, other meds being developed • Agitated Patient Restraint / Excited Delirium: Ketamine 3-5 mg/kg IM possibility • NHTSA: discussion as to what is discoverable and processes associated • Trauma protocol revision proposal (Guideline & nomenclature consistency based on ACS criteria COT is goal) • BLS CPAP: No opportunities for use so far in Region V. 	
<p>Mobile Integrated Healthcare</p>	<p>No formal report from EMSAB MIH Sub-comm</p>	<p>Specific question to go back to OEMS re how MIH is proceeding as above</p>
<p>Nor-epinephrine added to State Min Equipment List (Castellone/Kamin)</p>		<ul style="list-style-type: none"> • Agreement to utility of adding Nor-epinephrine as suitable substitute to Dopamine for vasopressor • Will add "Revision to State Minimum Equipment list" to list to the agenda
<p>Revision of State DNR/Discontinuation</p>	<ul style="list-style-type: none"> • Current document is from 2010 and in potential need of revision 	<ul style="list-style-type: none"> • Will remain on agenda for further work

of Resuscitation Doc (Castellone/Kamin)		
Statewide Unified Guidelines		<ul style="list-style-type: none"> • Plan to distribute draft on or before next meeting
CMED	<ul style="list-style-type: none"> • New Haven split between at least three communication centers 	<ul style="list-style-type: none"> • To remain on the agenda.
EMS Destination Guidelines (Zanker issue on intoxicants)	<ul style="list-style-type: none"> • Broader issue of destination for EMS patients that should include disease/issue specific concerns but also general issue re destination determination • State ED Directors acknowledge issue although may not be generalized regarding intoxicated patients • EMSAB also supports the clarification from OEMS re destination decision making 	<ul style="list-style-type: none"> • Will remain on agenda
Adjourned	<ul style="list-style-type: none"> • Next CEMSMAC meeting is scheduled for October 8, 2015 @ 10:00 am. 	

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD

AUGUST – NO MEETING

JULY – NO MEETING

CEMSMAC AGENDA

June 11, 2015 - 10AM

Location: CHA, 110 Barnes Road, Wallingford, CT 06492

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THERE WILL BE A SCT SUB-GROUP MEETING AT 0900 TILL 1000

- Review/Approval of minutes from May 2015 meeting
- DPH/OEMS Report (OEMS)
- SCT Review Process Update (Gallo/Carter)
- CT Stroke Systems of Care (Kamin)
- Meeting schedule over summer (Group)
- Regional MAC Reports – (Regional Reps)

OTHER BUSINESS/ONGOING INITIATIVES

- Statewide Unified Guidelines – ongoing formatting
- SMART Tag Training
- Mobile Integrated Healthcare (Bailey)
- Triage/dispo issue on intoxicants (Zanker)
- CMED

DRAFT
CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS

Location: AHA, 5 Brookside Dr, Wallingford, CT 06492
June 11, 2015
MINUTES

Member Attendees: Kyle McClaine, Richard Kamin, William Begg, Doug Gallo, Jim Castellone (phone), James Parker, Dave Cone

OEMS Staff: Raphael Barishansky, John Spencer

Guests: Mike Zanker, Kevin Burns, David Bailey, Patti Palaie, Robert Grant (phone), Ryan Carter, Joe Larcheveche, Sandy Bogucki, Marielle Daniels, Ian Medoro

Chaired By: Richard Kamin, M.D., and Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the May 2015 CEMSMAC meeting were reviewed.	Motion made to approve the minutes – unanimous approval

<p>DPH/OEMS Report - Raphael Barishansky</p>	<ul style="list-style-type: none">• Regular Legislative Session finished and Special Session planned with focus on Implementer Bill expected • What was 5907 – Ryan White - process/language moved in to DPH Tech Bill and approved • New 5907 contains the Waterbury Hatzolah supplemental first responder allowance language • 800 – MIH – lots of changes during session – stay tuned to the Implemented for final language<ul style="list-style-type: none">○ Funding is mentioned in Governor’s budget (not finalized) but the legislation did not make it out of session formally ○ Given potential for funding but no clear legislative direction it is not sure of future direction. ○ Both Study or a Pilot are possible • Multiple guidance documents expected from OEMS shortly on various statutory changes including: orderly transfer of care, elder abuse, and others.	
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	<ul style="list-style-type: none">• Alternative Provision process – one hearing in process, two more to be held (KB and Griswold Ambulance) – look to end of July for these hearings• Performance Standards document is continuing to be created• CT EMS Expo – “tremendous success”, >900 attendees per day – thanks given to Dave Bailey, Drs. Kamin and McClaine for speaking.• Kevin Brown (Education Coordinator) has retired from State Service.<ul style="list-style-type: none">○ Position is deemed “critical” so expected to be able to post/hire despite hiring freeze○ Look for posting in next couple weeks• DPH appointments made to Stroke Task Force. First meeting to be held in upcoming weeks.• Question from McClaine re status of Governor’s budget – no specific direction able to be given budget is still in flux – look for• Question from McClaine re potential of Medicaid funding cuts to EMS as seen in the Governor’s budget – not able to give direction	
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	<p>from OEMS</p> <ul style="list-style-type: none"> ○ Discussion from group was that cuts are still possible and a suggestion to please emphasize the significance of these cuts to representatives was put out generally ● AEMT Via Begg: <ul style="list-style-type: none"> ○ Expressed concern over timing of AEMT updates and educational guidelines ○ Question as to when will be available ○ Hartford Hospital <ul style="list-style-type: none"> ▪ Will sunset AEMT within 18 months ▪ Significant resources would have been needed ▪ Little gain in skill sets for their network for effort ▪ Focus on paramedics going forward ● 	
<p>SCT Medication Issue/Overall SCT discussion (Group)</p>	<ul style="list-style-type: none"> ● 9 responses to survey ● Survey sent out again ● Only 2 responders made point of mandating re-training after initial 	<ul style="list-style-type: none"> ● Work will continue ● Expect to continue meeting over the Summer ● Survey to be sent out again to increase response
<p>CT Stroke Systems of Care</p>	<ul style="list-style-type: none"> ● Further discussion on the import of establishing a Stroke System of care. ● Reviewed Region III stroke destination guideline that was recently developed and 	<ul style="list-style-type: none"> ● Will review findings of State Stroke Task Force as well as Region III process as they are available.

	planned for continued refinement	
Meeting schedule over summer (Group)	<ul style="list-style-type: none"> • Discussion re meeting over summer 	<ul style="list-style-type: none"> • Decision to continue to meet over summer with emphasis on not losing traction on ongoing projects – SCT, guidelines, intoxicants • Will potentially cancel full CEMSMAC meeting in July or August if agenda is too light
Regional MAC Reports (regional reps)	<p>Region I – July 7th planed – lunch Region II – No report - plan for September meeting Region III -</p> <ul style="list-style-type: none"> • Stroke destination guideline finalized • Anaphylaxis guideline reviewed/refined • CMED EMD guidelines reviewed/revise. <p>Region IV – No meeting</p> <ul style="list-style-type: none"> • Question re NECOG study – no specifics from McClaine • Region V – June 4th <ul style="list-style-type: none"> ○ MIH – 3 hospitals in region with interest ○ stroke diversion – focus on getting patients to stroke capable facility ○ AEMT anticipation re need for educational materials for current 	<ul style="list-style-type: none"> • Potential for consistent EMD guidelines discussed. Cone to send Kamin what he has done in New Haven area

	<p>services that want to go to current AEMT,</p> <ul style="list-style-type: none"> ○ Cyanokit discussed ○ ketamine discussed – high risk for abuse but potential ○ fentanyl possible ○ ? albuterol in other than paramedic provider 	
Mobile Integrated Healthcare	<ul style="list-style-type: none"> ● Summit well received but not well attended. ● Qaldigm approached Bailey re MIH initiative –Planning meeting for June 25 at 2pm – looking for EMS involvement, concern re transfer of care/information. 	<ul style="list-style-type: none"> ● To remain on the agenda
Statewide Unified Guidelines	<ul style="list-style-type: none"> ● Emphasis on creating process that keeps context of guidelines clear and does not hinder or create an onerous process for change/amending. ● Current pending regulatory language to be supplied by Ray ● Need to focus on creating a process that will support unified practice but not overly hinder or burden a sponsor hospital or region that wants to make a change 	
CMED	<ul style="list-style-type: none"> ● New Haven – Current plan for New Haven CMED is to have AMR handle dispatching 	<ul style="list-style-type: none"> ● To remain on the agenda.

	<p>for 8 municipalities.</p> <ul style="list-style-type: none"> Valley Shore and NW CMED also picking up municipalities that were served by New Haven CMED 	
SMART Tag Triage	<ul style="list-style-type: none"> Jon Best continues to look at process to refine mass casualty management system in CT that would likely include opportunity to train on SMART Tag system in addition to a broader mass casualty process. 	<ul style="list-style-type: none"> Invitation from Jon Best to interested individuals to participate in mass casualty management review/refinement process. Email to Jonathan.Best@ct.gov if interested in participating.
Intoxicated patient transfer out of typical catchment	<ul style="list-style-type: none"> Potential for statewide development of policy for disposition of intoxicated individuals still under consideration. 	<ul style="list-style-type: none"> Zanker to bring to CCEP/ED directors to better define issue and consider next steps <ul style="list-style-type: none"> Will remain on agenda for further discussion
Adjourned	<ul style="list-style-type: none"> Next CEMSMAC meeting is scheduled for July 9, 2015 @ 10:00 am. <p>***Location to be determined*** ***Meeting potentially cancelled (as above) if agenda is too light***</p>	

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD

CEMSMAC AGENDA

May 14, 2015 - 10AM

Location: AHA, 5 Brookside Dr, Wallingford, CT 06492

DIAL IN NUMBER 866-421-2934, PASS CODE: 32437828

PLEASE EMAIL YOLANDA WILLIAMS IF YOU ARE GOING TO CALL IN

THERE WILL BE A SCT SUB-GROUP MEETING AT 0900 TILL 1000

- Review/Approval of minutes from April 2015 meeting
- DPH/OEMS Report (OEMS)
- SCT Review Process Update (Gallo/Carter)
- SB 438 - CT Stroke Systems of Care (Belan, et al)
- Regional MAC Reports – (Regional Reps)

OTHER BUSINESS/ONGOING INITIATIVES

- Statewide Unified Guidelines – ongoing formatting
- SMART Tag Training
- Mobile Integrated Healthcare (Bailey)
- CMED
- EMS Expo – May 27th to 30th – Mohegan Sun
 - 27th – MIH pre-con – Dan Swayze (Penn)
 - Golf tournament – check website
 - EMS awards CT EMS councils link April 22nd

DRAFT
CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS

Location: AHA, 5 Brookside Dr, Wallingford, CT 06492
 May 14, 2015
 MINUTES

Member Attendees: Kyle McClaine, Richard Kamin, William Begg, Doug Gallo, Jim Castellone (phone)

OEMS Staff: Raphael Barishansky, Kevin Brown, John Spencer, Ann Kloter, Mike Rivers

Guests: Mike Zanker, Sean Fitch, Paul Rabeuf, Kevin Burns, James Brubaker, Peter Canning, Kristen Hickey, Dawn Beland, David Bailey, Patti Palaie, Glenn Arremony, Robert Grant, Ryan Carter,

Chaired By: Richard Kamin, M.D., and Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the April 9, 2015 CEMSMAC meeting were reviewed.	Motion made to approve the minutes – unanimous approval
DPH/OEMS Report - Raphael Barishansky	<ul style="list-style-type: none"> • DPH/OEMS Report (OEMS) • New epi introduced (Ann Kloter) – data efforts are gaining traction • 5907 ryan white act – moving forward – latest language on CT General Assembly site <ul style="list-style-type: none"> ○ Restructure reporting – designated officer by hospital – used list that is promulgated by CDC 	

	<ul style="list-style-type: none"> • 800 MIH – currently being discussed by legislators in relation to “community care teams” <ul style="list-style-type: none"> ○ “a pilot program in up to three municipalities” movement expected in next week or so • 999 tech bill – ems looking like it will be rolled in to regular tech bill <ul style="list-style-type: none"> ○ unsure if “orderly transfer of care” will make it through • 1010 – First Responder process circumvention – seems to be not moving ahead at this time • Once the session is over, and decisions have been made, there will be communication from the office to EMS providers and EMS agencies regarding practice changes • Alternate Provision – we have one hearing done and two more municipalities applying for Alternative Provision • Performance standards – <ul style="list-style-type: none"> ○ Appreciate comments - This is the first in long conversation – want to work cooperatively with DPH/MAC • Begg - Question regarding timing/content of AEMT memo <ul style="list-style-type: none"> ○ Expect additional discussion from Office • McClaine – Question regarding Governor’s budget – no update avail from OEMS 	
<p>SCT Medication Issue/Overall SCT discussion (Group)</p>	<ul style="list-style-type: none"> • First meeting today at 9 • Plan – identify who is doing SCT <ul style="list-style-type: none"> ○ What meds, what needs to be added/deleted ○ Development of formulary ○ Roster to be developed of those providing training and providers trained ○ Please encourage participation with sub-group 	<ul style="list-style-type: none"> • Survey to go out to stakeholders • Electronic discussion to continue before next meeting that is planned for next month – to be held hour before CEMSMAC
<p>SB 438 - CT Stroke Systems of</p>	<ul style="list-style-type: none"> • Discussion regarding history and potential for State 	<ul style="list-style-type: none"> • Will continue to look at issue

<p>Care (Belan, et al)</p>	<p>Wide Stroke Care Task Force development and EMS diversion/by-pass policy</p> <ul style="list-style-type: none"> • Legislative task force is not moving forward • Discussion regarding potential for separate group to look at process 	<p>via Region III/regional specific development and send up to State MAC for potential state-wide utilization</p>
<p>Regional MAC Reports (regional reps)</p>	<p>Region I – July 7th planed – lunch Region II – No report Region III -</p> <ul style="list-style-type: none"> • Stroke guideline • Pedi trauma – concern due to uncertainty of who goes to CCMC – Clarified so that all traumas accepted at CCMC • Spinal motion restriction – regional guideline corrected to be consistent to state <ul style="list-style-type: none"> ○ Misunderstanding of how patients are to be positioned – will work to clarify need for change to guideline <p>Region IV</p> <ul style="list-style-type: none"> ▪ Working to improve meeting participation ▪ Training unified regarding CCR, SMR, naloxone ▪ NECOG grant to look at EMS System structure, ALS availability – Look to study the system as a whole <p>Region V –</p>	

	<ul style="list-style-type: none"> ▪ AEMT – will be discussed due to large number of AEMTs in region <ul style="list-style-type: none"> • Who is interested in maintaining • Cost involved, and potential improvement to region ▪ Narcotic equivalency table developed out of region IV • June 4th - next meeting at Campion Ambulance Training Center in Waterbury 	<ul style="list-style-type: none"> • Gallo to distribute NAEMSP position papers on pain control and pediatric seizure
Mobile Integrated Healthcare	<ul style="list-style-type: none"> • Continuing to meet • Data from New Britain, Hartford Hospital, Joe L. 	
Statewide Unified Guidelines	<ul style="list-style-type: none"> • Formatting in progress 	
CMED	<ul style="list-style-type: none"> • New Haven – working towards transition • OEMS Regional coordinator working on regional approach for individual municipalities/services 	<ul style="list-style-type: none"> • To remain on the agenda.
Open Discussion	<ul style="list-style-type: none"> • CT EMS Expo – May 27th to 30th at Mohegan Sun 	<ul style="list-style-type: none"> • Planning on informal Friday night get together. • May 27th – MIH pre-con with Dan Swayze from Pennsylvania speaking • Reminder to sign up for Golf Tournament at the Expo (limited space so sign up soon) – check website

		EMS Awards Nominations can be made via the CT EMS Councils Website till April 22 nd – Please submit nominations
Intoxicated patient transfer out of typical catchment	<ul style="list-style-type: none"> ▪ ? need for CEMSMAC statement regarding best practice ▪ RI regulations state closest facility unless stemi/stroke/trauma ▪ Bailey - ? need to have better clarification from EMS providers about where they take patients <ul style="list-style-type: none"> ○ Is it legal to mandate taking patients to closest facility? 	<ul style="list-style-type: none"> • Zanker to bring to CCEP/ED directors to better define issue and consider next steps <ul style="list-style-type: none"> ▪ Will remain on agenda for further discussion
Adjourned	<ul style="list-style-type: none"> • The next CEMSMAC meeting is scheduled for June 11, 2015 @ 10:00 am. ***Location to be determined*** 	

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD

CEMSMAC AGENDA

April 9, 2015 - 10AM

Location: AHA, 5 Brookside Dr, Wallingford, CT 06492

DIAL IN NUMBER 866-421-2934, PASS CODE: 32437828

PLEASE EMAIL YOLANDA WILLIAMS IF YOU ARE GOING TO CALL IN

- Review/Approval of minutes from March 12, 2015 meeting
- DPH/OEMS Report (OEMS)
- SCT Review Process Update (Kamin)
- SMART TAG Training Update (Lillpopp)
- Legislative update (McClaine)
- CEMSMAC Endorsement of CT EMS EXPO Educational Lectures (Coler)
- Regional MAC Reports – (Regional Reps)

OTHER BUSINESS/ONGOING INITIATIVES

- Statewide Unified Guidelines – ongoing formatting
- Mobile Integrated Healthcare (Bailey)
- CMED
- EMS Expo – May 27th to 30th – Mohegan Sun
 - 27th – MIH pre-con – Dan Swayze (Penn)
 - Golf tournament – check website
 - EMS awards CT EMS councils link April 22nd

DRAFT
CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS

Location: AHA, 5 Brookside Dr, Wallingford, CT 06492 April 9, 2015

MINUTES

Member Attendees: Kyle McClaine, Richard Kamin, Bill Begg (phone), James Parker (proxy via Kamin), Jim Castellone

OEMS Staff: Raphael Barishansky, Kevin Brown, John Spencer

Guests: Mike Zanker, Sean Fitch, Paul Rabeuf, Kevin Burns, Mariel Daniels, Nancy Brunet, Jim Santacroce, Talia Brooks

Chaired By: Richard Kamin, M.D., and Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the March 12, 2015 CEMSMAC meeting were reviewed.	Motion made to approve the minutes – unanimous approval
DPH/OEMS Report - Raphael Barishansky	<ul style="list-style-type: none"> • 800 – Mobile Integrated Health Care - out of committee – moving forward <ul style="list-style-type: none"> ○ Currently with stipulation of max of three pilot programs • 999 – DPH/OEMS Tech bill – section 1 – DPH is advocating a more orderly transfer of patient care be codified in statute with the highest level of certified/licensed EMS 	

	<p>provider on scene having patient care responsibilities</p> <ul style="list-style-type: none"> • 1010 – Supplemental First Responder – originated from a specific municipality with concern for not wanting to sign off on responder providing first responder services <ul style="list-style-type: none"> ○ out of committee ○ DPH not supportive – DPH feels there is a need for consistency in process and is also concerned that 1010 allows circumvention of process to become Supplemental First Responder • Revised Mandatory Equipment List memo out via Everbridge/OEMS website • AEMT memo with timelines going out today <ul style="list-style-type: none"> ○ Clarification from Begg – what will be in memo? – From Barishansky - timelines for current AEMTs to come up to national standard for individual providers and organizations • New Data Manager (Anne Klotter) • There is currently one PSA hearing underway, with other paperwork expected in the near future. 	
<p>SCT Medication Issue/Overall SCT discussion (Group)</p>	<ul style="list-style-type: none"> • No in-person meeting of sub-group this month 	<ul style="list-style-type: none"> • Group to be led by Ryan Carter MD and Doug Gallo MD • Plan to meet electronically before next meeting and in-face before May CEMSMAC
<p>SMART Tag Training (by Kamin for</p>	<ul style="list-style-type: none"> • Will continue to look to rural health for 	<ul style="list-style-type: none"> • Will remain on CEMSMAC agenda

Lillpopp)	<p>funding</p> <ul style="list-style-type: none"> • DPH Office of Preparedness (Jon Best) is also looking to improve training opportunities via grant funding 	
Legislative update (McClaine)	<ul style="list-style-type: none"> • HB 5522 Elder abuse reporting, adding EMS to mandated reporters –moving forward • HB 5871 Adding workers compensation protection to EMS –Some confusion in language and definition of associated conditions • HB 6658 Required BLS Meds-Defeated • SB 253 EMS Payment Collection –bill to patient only after insurance denial –moving forward • SB 426 Employee Online privacy- employers cannot require social media access. Moving forward • Discussion re MOLST – Dr. Zanker asked if there will be a MOLST Bracelet? Zanker voiced concern from CCEP regarding the lack of a MOLST bracelet (or an identifier other than the form) may cause patients who do not want resuscitation to have CPR initiated due to lack of bracelet/identifier. 	<ul style="list-style-type: none"> • Re-affirmation from Kamin that MOLST pilot will not usurp/replace State DNR.
CEMSMAC Endorsement of CT EMS EXPO Educational Lectures (Coler)	<ul style="list-style-type: none"> • Fred Rosa asked if EMS-I credit will be approved from the OEMS for the CT EMS Expo educational lectures? 	<ul style="list-style-type: none"> • Brown – stated that no application for EMS-I credit has been applied for but he does not see any reason why EMS-I credit wouldn't be approved if there is an application. • Kyle – motion that CEMSMAC endorse the slate of educational lectures as distributed by Ms. Coler. <ul style="list-style-type: none"> ○ Second by Kamin ○ Unanimous approval

<p>Regional MAC Reports (regional reps)</p>	<p>Region I – No representative at meeting</p> <p>Region II – No representative at meeting</p> <p>Region III - No report – meeting canceled this month due to lack of expected attendance</p> <p>Region IV – meeting next week</p> <p>Region V –</p> <ul style="list-style-type: none"> • ALS revisions ongoing • BLS EKG added • Triage Tag day March '15 (WCHN) <ul style="list-style-type: none"> ○ 36% participation relative to all EMS calls for a 48 hour period ○ 85% accuracy of triage tags actually filled out ○ Lack of knowledge on receiving side (ER staff) area of opportunity • June 4th - next meeting at Campion Ambulance Training Center in Waterbury 	
<p>Mobile Integrated Healthcare</p>	<ul style="list-style-type: none"> • No report this month 	<ul style="list-style-type: none"> • Kamin urged group to continue to utilize ad-hoc sub-committee of EMSAB in order to best organize attempts at and development of MIH programs in CT
<p>Statewide Unified Guidelines</p>	<ul style="list-style-type: none"> • Formatting in progress • Thanks to David Bailey for his continued support and participation with getting the guidelines formatted. • OEMS personnel will take up process moving forward 	

<p>CMED</p>	<ul style="list-style-type: none"> • HB 6970 Bill to propose consolidation of PASPs for towns with population less than 40,000. Tied to financial performance incentive program 	<p>To remain on the agenda.</p>
<p>Open Discussion</p>	<ul style="list-style-type: none"> • CT EMS Expo – May 27th to 30th at Mohegan Sun 	<ul style="list-style-type: none"> • Planning on informal Friday night get together. • May 27th – MIH pre-con with Dan Swayze from Pennsylvania speaking • Reminder to sign up for Golf Tournament at the Expo (limited space so sign up soon) – check website • EMS Awards Nominations can be made via the CT EMS Councils Website till April 22nd – Please submit nominations
<p>Adjourned</p>	<p>The next CEMSMAC meeting is scheduled for May 14, 2015 @ 10:00 am. ***Location to be determined***</p>	

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD

CEMSMAC AGENDA

March 12, 2015 - 10AM

Location: CHA, 110 Barnes Road, Wallingford, CT 06492

DIAL IN NUMBER 866-421-2934, PASS CODE: 32437828

PLEASE EMAIL YOLANDA WILLIAMS IF YOU ARE GOING TO CALL IN

**THERE WILL BE A MEETING OF THE SCT SUB-COMMITTEE AT 0900
CALL IN NUMBER ABOVE**

- Review/Approval of minutes from February 12, 2015 meeting
- DPH/OEMS Report (OEMS)
- SCT Review Process (Group)
- SMART TAG training (Lillpopp)
- Potential for Statewide CARES Participation (Kamin)
- Legislative update (McClaine)
- Regional MAC Reports – Regional Reps

OTHER BUSINESS/ONGOING INITIATIVES

Statewide Unified Guidelines – ongoing formatting

Mobile Integrated Healthcare

CMED

SMR update –distributed via everbridge

EMS Expo – May 27th to 30th – Mohegan Sun

DRAFT
CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS

Connecticut Hospital Association (CHA)
 March 12, 2015

MINUTES

Member Attendees: Kyle McClaine, Richard Kamin, Sandy Bogucki (for Dave Cone), Bill Begg, James Parker

OEMS Staff: Raphael Barishansky, Kevin Brown, John Spencer, Jean Speck (phone)

Guests: John Quinlavin, Mike Zanker, Sean Fitch, David Bailey, Paul Rabeuf, Patricia Palaie, Kevin Burns, Ian Medoro, Mariel Daniels, Nancy Brunet, Phil Heavin, Jim Santacroce, Ryan Coughlin, Ryan Carter, Raffaella Coler

Chaired By: Richard Kamin, M.D., and Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the February 12, 2015 CEMSMAC meeting were reviewed.	Motion made to approve the minutes (Begg/Parker)
DPH/OEMS Report - Raphael Barishansky	<ul style="list-style-type: none"> • New Region 3 Regional EMS Coordinator John Spencer introduced and welcomed • OEMS is putting the final touches on the AEMT memo – this is expected to be released by April 1st and will advise the EMS Community on various deadlines regarding this level of certification 	

	<ul style="list-style-type: none"> • Legislative update • HB 5911/HB 6658 – DPH is remaining silent on these two bills • HB 6658 – Meds to be carried by all EMT/AEMT • HB 5911 – Restructure of EMSAB • SB 800 – DPH is asking for more data regarding the need for this Pilot program prior to moving forward • HB 5907 (Ryan White) – DPH supports this bill • SB 1010 - Supplemental FR not needing signoff from municipality and PSA holder – The Department is opposed to this bill as written and hopes for modified language. • SB 999 – DPH Tech Bill specific to EMS initiatives - this included the orderly transfer of patient care provision to allow highest level of EMS provider to have patient care responsibility – not looking to take scene authority away from the senior fire official on scene. <ul style="list-style-type: none"> ○ There was comment from J. Quinlavin re coming to support/provide testimony • McClaine – expresses import to have more engagement from group – will work to engage group more efficiently • 6658 – Mandate naloxone/ntg/epi – testimony against and allow local need 	
<p>SCT Medication Issue/Overall SCT discussion (Group)</p>	<ul style="list-style-type: none"> • Initial meeting of Ad-hoc sub-group met the hour prior to March 2015 CEMSMAC • Attendees – Kamin, McClaine, Santacroce, Burns, Brunet, Rabeuf, Bova (phone), Speck 	<ul style="list-style-type: none"> • Group to be led by Ryan Carter MD and Doug Gallo MD • Plan to review current Medication list/curriculum and revise.

	(phone)	<ul style="list-style-type: none"> • Will examine need to expand/change the SCT program to improve critical care inter-facility care • Commercial providers were identified as essential stakeholders and will be engaged • Will examine the potential for formal state certification/endorsement for SCT providers • Import of refining data collection process surrounding the SCT program (course provision, who/how many trained, QA regarding clinical care provided, etc). • “Survey Monkey” pending to ask all SCT meds and process requests • Group will meet regularly - likely hour before CEMSMAC in same location
SMART Tag Training (by Kamin for Lillpoppp)	<ul style="list-style-type: none"> • Discussion regarding import of ongoing training for providers • Potential for funding/support from Rural Health Initiative 	<ul style="list-style-type: none"> • Motion made by Kamin - “CEMSMAC to support the development of opportunity to improve training/competency with smart triage”. Second by Begg – approved unanimously.
Statewide CARES Participation (Kamin at request of Cone)	<ul style="list-style-type: none"> • Discussion surrounding future of CARES participation given transition to subscription cost needed in near future 	<ul style="list-style-type: none"> • Point made that AMR contributes agency wide/nationally – unsure if they will continue • Further discussion on this issue needed in April or May

SMR update	<ul style="list-style-type: none"> • Distributed via everbridge 	
Regional MAC Reports	<p>Regional MAC Reports – Regional Reps</p> <p>Region I – meeting to be rescheduled</p> <p>Region II – no report</p> <p>Region III –</p> <ul style="list-style-type: none"> • Stroke care benchmarks being discussed • Spinal Motion Restriction & C-Spine precautions discussed/clarified. • New ET Tube proposal from HH w/subglottic suctioning potential to decrease ventilator associated pneumonia – cost of new tube \$60 vs \$3 for traditional tube – no change proposed <p>Region IV – Part time EMS Coordinators for DKH (Valerie Cassidy) and Backus (Gillian Schaff) have been named. Regional approach to BLS training and sharing of educational opportunities has begun. Preliminary commitment to utilizing statewide guidelines when released. Study of EMS needs for northeast corner of state with a secured grant is planned. Meeting this month to secure a vendor to complete the study.</p> <p>Region V – Region V meeting Waterbury, CT 2/19/05 over 20 attendees</p> <ul style="list-style-type: none"> • CEMSMAC Co-Chair Kyle McClaine, MD attended and gave perspective • Recognize Dr Peter Jacoby (St Mary’s Hospital), Region V Chair & champion. • CPAP for BLS update -no utilization to date 	

	<p>for those with ability to do so.</p> <ul style="list-style-type: none"> • Region V Guidelines <ul style="list-style-type: none"> ○ Annual review of “carve outs” guidelines from local hospitals to see if there is an opportunity to become one with Region. Ie one hospital has a carve out to use hydralazine, but hasn’t used it since inception ○ Reg V guidelines Format discussion ○ Nitropaste re-introduced into protocols for subset of those with cpap requiring nitro SL ○ CCR: await newer guidelines before instituting ○ BLS EKG discussion and endorsement ○ Impedance threshold devise utility: costly with no sig advantage • Medical marijuana transport. Consider treating similarly to other controlled substances, in an appropriately labeled container. <ul style="list-style-type: none"> ○ Treat as any other prescription med/controlled substance; has to be in a labeled bottle. Pts not in a position to take meds without input from medical personnel. • Next meeting late May/ early June 	
<p>Mobile Integrated Healthcare</p>	<ul style="list-style-type: none"> • David Bailey heading up EMSAB MIH Sub-committee - efforts statewide are coming together via dialogue between groups that are initiating individual efforts. 	<p>Dr. Bogucki – will DPH’s stance be problematic to services/institutions that are looking to institute program? Question from Sandy regarding how to assist OEMS in</p>

	<ul style="list-style-type: none"> Concerns: initiation of legislation may be premature due to lack of data, unsure how cost will be addressed, home health provider/stakeholders that have communicated with Bailey have pressed to have process go forward without legislation, concern for DPH placing testimony against 800, working on getting more data about high utilizers, data re-admission issues needed 	<p>moving forward.</p> <p>Coler – Data should be available from current 911/PSAP perspective. Ralf expressed concern that nursing is worried that current nursing practice will be encroached on and not enhanced.</p>
Statewide Unified Guidelines	Formatting is still in progress. Evidence based clinical guidelines developed through the Pegasus process will be considered for inclusion	The Guideline will be formatted and sent to the group for review.
CMED	No report.	<p>Dr. Bogucki stressed the import for “ongoing state surveillance” due to concern regarding patient care issues with increasing incidents due to failure/inadequate communication. Leads to concern on how this has and will lead to impacting patient care</p> <p>To remain on the agenda.</p>
NHTSA	No report.	To remain on the agenda.
Open Discussion	<ul style="list-style-type: none"> CT EMS Expo – May 27th to 30th at Mohegan Sun 	<ul style="list-style-type: none"> Planning on informal Friday night get together. Reminder from Ralf Coler regarding importance of Sponsor Hospital contribution to EMS Expo – info

	<ul style="list-style-type: none"> • EMS Awards Nominations can be made via the CT EMS Councils Website till April 22nd – Please submit nominations 	<p>available on website</p> <ul style="list-style-type: none"> • May 27th – MIH pre-con with Dan Swazy from Pennsylvania speaking • Reminder to sign up for Golf Tournament at the Expo (limited space so sign up soon).
<p>Adjourned</p>	<p>The next CEMSMAC meeting is scheduled for April 9, 2015 @ 10:00 am.</p>	

Respectfully submitted: Richard Kamin MD, Kyle McClaine MD

CEMSMAC AGENDA

February 12, 2014 10 AM

Location: CHA, 110 Barnes Road, Wallingford, CT 06492

DIAL IN NUMBER 866-421-2934, PASS CODE: 32437828

PLEASE EMAIL YOLANDA WILLIAMS IF YOU ARE GOING TO CALL IN

THERE IS NO UNIFIED GUIDELINES MEETING THIS MONTH

- Review/Approval of minutes from January 8, 2014 meeting
- DPH/OEMS Report (OEMS) –

Ryan White memo update

AEMT memo update

Regional Coordinator positions update

Legislative update

<http://www.cga.ct.gov/2015/TOB/H/2015HB-06658-R00-HB.htm>

http://www.statescape.com/SSBillText/CT2015/CT_2015_HB_005272_Current_9461.htm

http://www.statescape.com/SSBillText/CT2015/CT_2015_HB_005911_Current_2218.htm

http://www.statescape.com/SSBillText/CT2015/CT_2015_HB_005522_Current_0271.htm

Alternative Provision of EMS/Local EMS plans

SCT Medication Issue (Begg/Kamin/Brown)

SMART TAG training (Lillpopp/Kamin)

Regional MAC Reports – Regional Reps

OTHER BUSINESS/ONGOING INITIATIVES

EMS Expo – May 27th to 30th – Mohegan Sun

Statewide Unified Guidelines

Mobile Integrated Healthcare – Min Distributed

CMED discussion and update

DRAFT

**CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS**

**Connecticut Hospital Association (CHA)
February 12, 2015**

MINUTES

Member Attendees: Kyle McClaine, Richard Kamin, David Cone, Bill Begg, Jim Castelone, Doug Gallo (Phone)

OEMS Staff: Raphael Barishansky, Kevin Brown

Guests: John Quinlavin, Mike Zanker, Sean Fitch, David Bailey, Michael Zacchera, Paul Rabeuf, Patricia Palaie, Kevin Burns, Ian Medoro, Mariel Daniels, Michael Bova, Nancy Brunet, Fred Rosa, James Brubaker

Chaired By: Richard Kamin, M.D., and Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	The minutes of the January 8, 2015 CEMSMAC meeting were reviewed.	Motion made to approve the minutes (Cone/Gallo)
DPH/OEMS Report - Raphael Barishansky	<ul style="list-style-type: none">• Ryan White memo sent from OEMS to EMS agencies re: obligations of Emergency Response Entities (ERE) in regard to Ryan White Act• AEMT memo update – legal signed off recently – language being touched up,	<ul style="list-style-type: none">• D. Bailey – asked to please include sponsor hospitals on memos like this.

	<p>scheduled to be sent out within the next 30 days</p> <ul style="list-style-type: none"> • Regional Coordinator positions update – interviewing currently with two potentials candidates sent to DPH Human Resources for approval • Legislative update • 5911 will go to public hearing • 6658 – naloxone – Ray spoke of a possible mandate for naloxone to be carried by all levels of provider is not optimal in regards to patient care • SB 800 – pilot for Community Paramedicine – Bailey • Gov bill re overdose – McClaine – concern that mandate is implied for EMS • EMSAB bill (5911) – McClaine echoed concern 	
<p>SCT Medication Issue/Overall SCT discussion (Begg/Kamin/Brown)</p>	<p>SCT Medication Issue – overall – is there a place for “real time” education regarding a medication/intervention that is not formally on the SCT curriculum but may be needed during an inter-facility transfer?</p> <p>Kamin – this type of process was one of the motivators for development of SCT and as such concern re allowing it is appropriate</p> <p>Begg mentioned the potential need to allow carve out for meds/interventions that may not be on the list</p> <p>McClaine – need to update and refresh SCT program – Does the group want to update the</p>	<p>McClaine – ASM to share list of what they consider current from the course they are providing</p> <p>Kamin – motion to create subcommittee to further the conversation and possible update documents and overall program</p> <p>Motion carried unanimously – interested individuals to contact chairs re involvement</p>

	<p>process?</p> <p>Brunet – ASM – does course every 2 years and has expanded med list – also need to prune list</p> <p>Bailey – possible to consider focus on comprehensive strategy for more generalized approach – focus on drug categories/classes – not specific meds</p> <p>Bova – their policy is for the shift manager for EMS to make declaration of appropriateness of meds/intervention – not bedside provider to avoid concern for providers to feel forced to provide intervention they are not trained appropriately for or may not be comfortable providing</p> <p>Gallo – Med Con makes the decision if concern arises 24/7</p> <p>Brown – SCT never designed to be static, has not been static – need to look at how it has been updated and needs to be continuously updated</p> <p>Also – still need to be specific when there may be unique complications associated with med regardless of the class it sits in</p> <p>Rabouf – can DPH send out letter that defines what can and can't be done Burns - potential utility for certification at SCT level to make more consistent</p> <p>Quinlavin – same concerns today that were present at time of creation. – points out need for revision</p>	<p>Ray – will investigate with Wendy</p>
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<p>Regional MAC Reports</p>	<p>Regional MAC Reports – Regional Reps</p> <p>Region I – meeting to be rescheduled</p> <p>Region II – council meets this coming Tuesday at 10</p> <p>Region III – stroke care discussed – looking at improved consistency of neuro checks as well as capabilities of destination facilities, sepsis alert – discussion re inconsistency of various definitions of sepsis – concern for false positives – looking at data/process next month. Vasopressin now vasostrict – concern for lack of availability and change in cost. Expectation to be able to get generic</p> <p>Region IV – met yesterday – loss of EMS coordinator from two hospitals. Meeting to be held q other month, regional skills sessions being planned/held, regional train the trainer regarding CCR, naloxone and SMR</p> <p>Region V – plans to meet Feb 19th, discussion re SCT appreciated</p>	<p>Cone – sepsis abstracts from NAEMSP to be distributed</p>
<p>Mobile Integrated Healthcare</p>	<p>Mobile Integrated Healthcare – Min Distributed</p> <p>Bailey – group will look at data elements to support process, concern re legislative initiative – next meeting possibly in Stamford.</p>	

	<p>Want to ensure that pilot programs, if created, are collecting proper data, prevent duplication of efforts</p> <p>CHA – got call from attorney who represents Stamford ems re support of CHA for the Stamford development of a pilot/program.</p> <p>Ray asked if there was anything wrong with taking a wait and see approach regarding SB 800 and, at the same time, moving ahead with the Community Paramedicine Working Group</p> <p>Overall support of thought process that looks at question and decision on getting data</p> <p>Baily - next meeting will be a “go to/electronic” meeting (remote) then schedule meeting from there</p> <p>Discussion re Yale – admission reduction program – lift assist follow up by “research assistants” (have paramedic training) who will follow up, go out to patients home. Ryan Carter/Sandy Bogucki– Co-Pi</p>	
<p>Statewide Unified Guidelines</p>	<p>Formatting is still in progress. Evidence based clinical guidelines developed through the Pegasus process will be considered for inclusion</p>	<p>The Guideline will be formatted and sent to the group for review.</p>
<p>CMED</p>	<p>No report.</p>	<p>To remain on the agenda.</p>

<p>NHTSA</p>	<p>No report.</p>	<p>To remain on the agenda.</p>
<p>Open Discussion</p>	<p>CT EMS Expo – May 27th to 30th at Mohegan Sun -</p> <p>Motion to add discussion on NASEMSO proposal develop national guidelines/standards for EMS specialties</p> <p>Discussion re NASEMSO initiative – support of process, concern for process that is under development, NAEMSP involvement needed</p> <p>Ray – reinforces reality that we have had these discussion in the State as well as at NASEMSO meetings and that this could be very important</p>	<p>Planning on informal Friday night get together.</p> <p>Motion (Kamin/Cone) made and passed unanimously</p>
<p>Adjourned</p>	<p>The next CEMSMAC meeting is scheduled for March 12, 2015 @ 10:00 am.</p> <p>No Guidelines meeting.</p>	<p>Meeting adjourned at 11:34 am.</p>

CEMSMAC AGENDA

JANUARY 8, 2014 10AM

Location: CHA, 11 Barnes Road, Wallingford CT

DIAL IN NUMBER 866-421-2934, PASS CODE: 32437828

PLEASE EMAIL YOLANDA WILLIAMS IF YOU ARE GOING TO CALL IN

THERE IS NO UNIFIED GUIDELINES MEETING THIS MONTH

- Review/Approval of minutes from December 11, 2014 meeting
- DPH/OEMS Report (OEMS)

Ebola Preparation and Education – Discussion

Regional Coordinator positions

Legislative update

Alternative Provision of EMS/Local EMS plans

- Review of, and vote on, minimum equipment lists
- Regional MAC Reports – Regional Reps

OTHER BUSINESS/ONGOING INITIATIVES

SMR protocol discussion (Cone)

Statewide Unified Guidelines

Mobile Integrated Healthcare

CMED discussion and update

NHTSA report

**CONNECTICUT EMS MEDICAL ADVISORY COMMITTEE (CEMSMAC)
AND
EMS CLINICAL COORDINATORS**

**Connecticut Hospital Association (CHA)
January 8, 2015**

MINUTES

Member Attendees: Kyle McClaine, Richard Kamin, Jim Parker, Cone, Gallo (phone), Begg (phone)

OEMS Staff: Raphael Barishansky, David Bailey, Yolonda Williams

Guests: Evie Marcolini, Gary Wiemokly, Mike Zanker, Sean Fitch, Robert Grant, Raffaella Coler, Michael Zaccher, Paul Rabeuf, Patricia Palaie, Kevin Burns, Ian Medoro, Joe Larcheveque

Chaired By: Richard Kamin, M.D., and Kyle McClaine, M.D.

TOPIC	DISCUSSION	ACTION
Meeting called to order at 10:00 am	<p>The minutes of the December 11, 2014 CEMSMAC meeting were reviewed.</p> <p>Changes - Minutes should reflect that the Region 3 Coordinator is leaving, not the Region 2 Coordinator.</p>	Motion made to approve the minutes with the addition added.
DPH/OEMS Report by Raphael Barishansky	<ul style="list-style-type: none"> ○ Ebola preparation and Education – OEMS and the Public Health Preparedness Directors are in contact with various 	

	<p>commercial EMS providers in regard to transportation of pts exposed to Ebola. A draft letter for all local health Directors is being developed.</p> <ul style="list-style-type: none"> ○ EMS Regional Coordinators positions – Region 4 has been interviewing and resumes are being forwarded for review to EMS to conduct 2nd interviews. Waiting for Region 3. ○ Legislative Session is now open. Discussion regarding PSA, alternative provision and development of local EMS Plans. Twenty (20%) of the EMS organizations received letters to submit their plans by January 1st. Some plans have been received. ○ AEMT Level – OEMS is looking at this level to be trained to the Scope of Practice (SOP). A draft memo from OEMS outlining the changes as well as timelines is currently being reviewed by DPH legal representation. ○ There is proposed EMSAB legislation on the Orderly Transfer of Patient Care – Currently, the Fire Chief is in charge of the emergency piece. 	<p>More information to come.</p> <p>More information to come.</p>
<p>Equipment List Review and Vote - David Bailey</p>	<p>Highlights were reviewed and discussed.</p> <p>In addition, not included in the document. Brief</p>	

<p>Regional MAC Reports</p>	<p>Region 1 – First meeting scheduled for January 26, 2015 at 11:00 am at</p> <p>Region 2 – Currently without a MAC and work is underway to develop one.</p> <p>Region 3 –Meeting scheduled for next week.</p> <p>Region 4 – Train the Trainer sessions were held.</p> <p>Region 5 – Dr. Jacoby will remain as the Regional 5 MAC Chair</p>	<p>Agenda to come.</p> <p>Will inform the group as information becomes available.</p>
<p>SMR Protocol – Discussion</p>	<p>The classes are done. Dr. Cone brought up an issue with the protocol and spinal injuries/the High Risk Mechanism.</p> <p>Discussion held.</p>	<p>Dr. Kamin made a motion – moved that the mechanism be removed and strike the box line. Dr. Cone second the motion (Remove box and revise wording based on assessment care information)</p> <p>Vote: Yes – Unanimously passed. No - Abst -</p>

Statewide Unified Guidelines	Formatting is still in progress.	The Guideline will be formatted and sent to the group for review.
Mobile Integrated Healthcare	This is ongoing. An Ad Hoc group is currently being developed by the EMSAB and the first date is scheduled for 01/14/15.	Please contact John Quinlavin if interested in sitting on the Ad Hoc group.
CMED	No report.	To remain on the agenda.
NHTSA	No report.	To remain on the agenda.
Open Discussion	<p>CEMSMAC meetings.</p> <p>Discussion ensued. Dr. Kamin opened the discussion about having the monthly meetings remotely and possibly meeting quarterly.</p>	<p>Motion made to add item to the agenda.</p> <p>Vote Yes – Unanimously passed No – Abst –</p> <p>Meetings will continue as is – no changes.</p>
Adjourned	The next CEMSMAC meeting is scheduled for February 12, 2015 at CHA, @ 10:00 am. No Guidelines meeting.	Meeting adjourned at 11:34 am.

Respectfully submitted by Yolonda Williams