

May 2, 2016

Motion to accept prior meetings, not approved or passed...

DIRECTOR: We have been asked to provide a complete operational plan, Patti can only find where you update it. We finally got a copy of the original operational plan from when we first started, she is confused about how to update it. We are legal to run with one EMT and one EMR. He is going to come up to help Patti figure out how to update it. OFFICIALLY, yes we can run that way. Just an update is not good enough, we are going to make a completely new, updated operational plan.

NEW prospect for the summer class, interview is going to happen soon, she is already signed up with WITC. This class is going to be super-intensive.

Laurie has stepped down from payroll liaison, Patti is taking over that position. So if there are any problems with the payroll, send them to Patti.

Visit the website that we gave out last month, get yourselves acquainted with the new layout for doing our run reports.

BAC-EMS REPORT:

Any suggestions for changes to protocol, let Tam or the doctor know.

Switching to drop style Epinephrin, because injection epi is very expensive, and expires before we use it. The drop style epi is 1/10th the cost of the injection style. Dosages are listed on the syringe. Tam is a "train the trainer", so we can do a training in-house. Protocol has already been written, but is not printed yet. June 1st is the goal for getting everyone trained by. Tam suggests we get both, as they are not really "multi-dose vials".

Backboard: we are changing that protocol as well, so we are going to have more leeway with that, new algorithm for how to proceed with care.

Upcoming FREE trainings: May 12 Northcare Air is putting on a 3 hour training in Siren at their airport, helicopter training.

May 14 Northern Great lakes visitor's center Lifelink Training, with 1 hr. in-class, and then weather-permitting landing training. RSVP because food is being provided. Bring outdoor clothing.

Tues June 14th Rice Lake, Pediatric disaster care, through Northwestern

Sat. June 4 11-2, Brule, "Be Somebody" campaign, with media coverage. If planning on showing up, please wear EMT clothing, is for recruitment.

June 11th, "Active Shooter" training. Is going to be a "surprise" for the Ashland fire department, so we are encouraged not to show up early and not tell others.

If anyone is planning on going to any of these, please let everyone know that you are going so that we can cover the shifts at home and/or carpool to the event.

MMC is having a lot more ER calls than is usual. Lots of drug overdoses. 3 people have yet to be trained in NARCAN. Frank suggests we get the last people trained next month at the training meeting.

There is going to be a new RTEC director coming on next month.

If anyone knows 6-8th grade girls interested in health care, there is a camp in Delta (camp northwoods) June 12-16, they will leave it with a CPR card, and be trained in a variety of healthcare-related things. The aim is to get girls interested in healthcare professions. Cost is only \$35, has been posted in the schools, but message may not get across, so we are encouraged to let kids know that we know in person, as EMTs. Last year there was a father who ended up being an EMT because his daughter participated in the program.

Larry is not here, so no Ambulance Maintenance report.

Paul is on a run right now, so no Communications report. Frank: does anyone know where the radio that was in the ambulance is? It disappeared two weeks ago.

Hall Maintenance: Everything is OK

HIPPA: It is ok if patient refuses HIPPA form, just needs to be documented. Communication has to be discreet enough to not be identifying in any way, just enough info so that we can indicate which call without any identifying info.

Marcia gone.

TRAINING: Frank asked how many people would want to play with the new epi drop, so he is going to order enough for training as well.

Next month is the landing zone training, and all of the fire departments are invited. A couple people, weather permitting, even get to go up and fly around.

TREASURER: \$15,217.39 in the account. Please email Jenny if there is a need for cash in the ambulance. Also, she left an envelope with the money in it, please include receipts for snacks, etc, also gas, and leave them in this envelope. If you forget to get a receipt, just write the amount and initial it on the envelope.

OLD NEWS: FRANK: We need to seriously look at capnography, looking into the "why nots", if we are interested, we could possibly get the equipment here for a couple of weeks to play with, also some trainers could come along as well. Capnography gives us a better idea of what is going on with the patient, other than just relying on the pulse ox...If we are interested, we can get some numbers together and get rolling with getting the training. Laurie is wondering how many hours the initial training is, 3 hours was the answer given. Gayle: would love to do capnography, which gives you a reading of co2 level, gives you a more accurate picture, could help us make better decisions in patient care. Seems to be a consensus that we are interested. Patti: Frank, sounds like we are interested, could you spearhead this? And find out costs for machines, etc. Frank: Yes. Gus: Capnography and 12 leads are becoming the standard of care, so if we don't move forward on this we will eventually become just an "EMR service". There is a point of contention about 12 leads, but more warm towards the capnography machine. We are agreed that we are going forward on the capnography machine.

NEW BUSINESS:

POLICY AND PROCEDURE MANUAL:

Gus: Are these Standard operating guidelines or standard operating procedures? Answer: These are our own policies and procedures that are specific to our service, as opposed to the BAC-EMS basic protocols. Frank made a motion to wait until the next meeting to approve these new amended procedures, Guy seconds. Gus: can there maybe be a part about radio usage, like which channels we should use, etc., because we had trouble with that last summer.

Patti: Please email Gayle or I if you come up with anything to add. Bev: Something mentioning the helicopter landing zone? Tam: I think we should add a line under response to dispatch paging, since we are one of the only services that may be running with an EMR, bear in mind that if the EMR picks up and says, I am going to the hall, that means South Shore "owns " that call, which means if there is no other EMT around, that EMR has to contact dispatch and tell them that they need another page, for Iron River or Washburn, etc. It was later found that this was already mentioned in the updated procedure manual.

If the report was not submitted within one week, they would not be paid. Patti: I did a lot of research, contacted the state, and found the statute, DHS110.34 , therefore we are required by law to submit paperwork within 7 days, DHS110.04 under Definitions, number 66, therefore it is Patti's responsibility that we are all following that statute. So we must follow that statute otherwise individuals are not getting paid for that run. Gayle: I am not sure if that has to be The consequence, which is not in the state statute, that we need to implement to make sure that this gets accomplished. Also, the fact that other people on the run are also responsible for signing off on the run, and then she doesn't get paid as a consequence, that she is going to be held responsible for other people's disregard would make her not feel much like being an effective volunteer. We need to look at what is the root cause of the untimely paperwork, is it internet access, jobs, etc.?

On one of the recent runs, the computer itself lost our paperwork...the computer is one of the problematic elements. There are also problems with the program itself, we MUST "Save" it on the bottom--- that needs to be pressed to save the signatures. Posting in Fieldbridge means we are taking it from the computer in the ambulance to the internet, then once it is "posted", you are obligated to use any other computer than the ambulance one.

Suggestion: On day 3 or 4, Marcia needs to go through the run and compile a list of what is missing, checking your emails is important because Marcia is going to be keeping in touch with the status of the run.

Also it should be noted that people that live in Herbster naturally take more responsibility for these things because they often meet people in Port wing and Corny, therefore they are the last ones to close up shop and we should be cognizant of that fact.

Patti: Let's start keeping a log of our computer problems so that we can get a better idea if we need a new computer, more training, etc. We need to pinpoint the root causes of why we are having trouble with getting our paperwork done.

Gayle: This should be something that we put in the procedure manual, a step by step guide to how to do everything having to do with documentation.

Run Report: We have had 2 in the last month. We also have missed 2 calls in the last month. Patti: hopefully with 3 more EMTs we will achieve full coverage.

Logging accident: Pt. was apparently riding between the tires on a forklift, fell down, his ankles got caught under the rear tire, got slammed to the ground, back pain. He had been dragged a few feet. EMT waited, didn't want to move him, Pt. said his feet were numb, with pain in his hips and shoulder. Splinted in position, rolled him onto a backboard with a vacusplint on it. Paramedics got there before we left the scene. Then the helicopter came, and for some reason were only 20 minutes away. We used the gym's parking lot as landing zone, and the helicopter service somehow had the wrong coordinates so there was some extra communication work to do. It was brought up that our patients may have large, firm bellies, so it may not be distention, we should ask if it is normal for the patient or not. Noted that the spider straps were applied incorrectly...maybe there should be a firefighter training on this subject?

There was a frequent flier call that we missed, this time it was a fall. It was noted that we have to take these calls to the hospital, and that there is nothing that we can do about it in case there was another more serious call that happens at the same time. Does anyone know if there are any check in-type groups that go around and visits with people like this? Yes, there are a couple of ladies at church who check in on this particular frequent flier. This one does not seem to be dangerous to herself or others.

Marcia has thought about the ambulance auxiliary putting on a dance and apparently has a band reserved...

We have a new water heater, courtesy of the Town of Clover, please check it out.

Adjourned at 7:50 pm.