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| **oemslogo** | **Meeting Minutes** |
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| Subject: | Medical Services Committee |
| Date: | October 10, 2014 – final |
| Voting  Members:  Absent Members: | Dr. Burstein (chair), Dr. Bailey, Dr. Dinneen, Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old, Dr. Patterson, Dr. Pozner, Dr. Restuccia and Dr. Tennyson.    P. Brennan, Dr. Walker, Dr. Walter and Dr. Wedel. |

# Agenda

[1.0 Agenda .1](#_Toc208315781)

[2.0 Call to Order .1](#_Toc208315782)

[3.0 Motions](#_Toc208315783) ..1-2

4.0 Action Items…………………………………………………………………………..…….…2

Old Business……………………………………………………....…………………….……........3

New Business……………………………………………………………………………..……..3-6

[Next Meeting](#_Toc208315788) 6

# Call to Order

Dr. Jon Burstein called to order the August meeting of the EMCAB Medical Committee at 10:02 am on October 10, 2014, in the Operations Room at the Massachusetts Emergency Management Agency in Framingham, MA.

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# 3.0 Motions

The following table lists the motions made during the meeting.

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| **Motion** | **Result** |
| **Motion:** by Dr. Dinneen to approve the August minutes. Seconded by Dr. Geller | Approved - Dr. Bailey, Dr. Dinneen,  Dr. Dyer, Dr. Geller, Dr. Old, Dr. Patterson, Dr. Pozner, Dr. Restuccia, and Dr. Tennyson. Abstentions-none, opposed-none. |

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| **Motion** | **Result** |
| **Motion:** by Dr. Restuccia to require Midazolam be carried on ALS ambulances and that the other  benzodiazepines (Lorazepam, Diazepam) will be optional. Seconded Dr. Pozner. | Approved - Dr. Bailey, Dr. Dinneen,  Dr. Dyer, Dr. Geller, Dr. Old, Dr. Patterson,  Dr. Pozner, Dr. Restuccia, and Dr. Tennyson.  Abstentions-none, opposed-none. |

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| **Motion** | **Result** |
| **Motion:** by Dr. Pozner to recommend the Cadet projects remain as special projects and that the programs submit CQI data to the Department 2 times a year. | Approved - Dr. Bailey, Dr. Dinneen,  Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,  Dr. Patterson, Dr. Pozner, Dr. Restuccia,  and Dr. Tennyson.  Abstentions-none, opposed-none. |
| **Motion** | **Result** | |
| **Motion:** by Dr. Poznerto have the Committee  re-review Bolton’s special project waiver.  Seconded-Dr. Geller. –Not approved. | Yea - Dr. Geller and Dr. Pozner-2  Nay -Dr. Dinneen, Dr. Old, Dr. Restuccia and Dr. Tennyson-4.  Abstentions-Dr. Bailey, Dr. Dyer,  L. Moriarty and Dr. Patterson-4. | |

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| **Motion** | **Result** |
| **Motion:** by Dr. Geller to keep Medication  Assisted Intubation (MAI) as a special project. Seconded Dr. Dinneen. | Approved - Dr. Bailey, Dr. Dinneen,  Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,  Dr. Patterson, Dr. Pozner, Dr. Restuccia,  and Dr. Tennyson.  Abstentions-none, opposed-none. |

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| **Motion** | **Result** |
| **Motion:** by Dr. Pozner to approve EasCare’s “Management of EOL/DNR” patient protocol. Seconded by Dr. Geller. | Approved - Dr. Bailey, Dr. Dinneen,  Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,  Dr. Patterson, Dr. Pozner, Dr. Restuccia,  and Dr. Tennyson.  Abstentions-none, opposed-none. |

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| **Motion** | **Result** |
| **Motion:** by Dr. Pozner to approve the EasCare Protocols  for gait monitoring, home medication administration device, temperature monitoring and i-Stat. Seconded by Dr. Dinneen. | Approved - Dr. Bailey, Dr. Dinneen,  Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,  Dr. Patterson, Dr. Pozner, Dr. Restuccia,  and Dr. Tennyson.  Abstentions-none, opposed-none. |

**4.0Action Items**

The following table lists the action items identified during the meeting

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| **Item** | | **Responsibility** |
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1. **Minutes**

**Motion:** by Dr. Dinneen to approve the August minutes. Seconded by Dr. Geller

Approved - Dr. Bailey, Dr. Dinneen, Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,

Dr. Patterson, Dr. Pozner, Dr. Restuccia, Dr. Tennyson and Dr. Walter.

Abstentions-none, opposed-none.

2. **Task Force** – chairs to distribute written reports as needed-no reports

3. **Old Business**

a. System CQI report- no report

b. MATRIS-no report

4. **New Business**

**a. Membership replacement vote-J. Burstein**

MSC has one seat to fill. Received 13 applications. Ballots to R. Atherton for tally.

**b. Haloperidol IV discussion-Dr. Burstein**

Based on an FDA document, the Bureau Director removed the IV route for Haloperidol from the Protocols.

**c. Benzodiazepines to be carried-**

Region 4 recommends simplifying the Benzos required. Currently must have Midazolam

(Versed) and another Benzo-Lorazepam (Ativan) or Diazepam (Valium). Region 4 Medical Directors recommend that as a minimum requirement Midazolam must be carried. Services can opt to carry Valium or Ativan.

**Motion:** by Dr. Restuccia to require Versed be carried on the ambulance and that the other

Benzodiazepines will be optional. Seconded Dr. Pozner.

Approved - Dr. Bailey, Dr. Dinneen, Dr. Dyer, Dr. Geller, Dr. Old, Dr. Patterson, Dr. Pozner,

Dr. Restuccia, and Dr. Tennyson. Abstentions-none, opposed-none.

**d. Cadet programs SPWs**

The committee is being asked to make a recommendation to the Department. Should the cadet special projects continue as is or should the regulations be changed to allow programs statewide? The 2 cadet programs presented.

1. Bolton Ambulance-Dr. Marc Gautreau-Medical Director for the Bolton Ambulance Project.

The program is run with the Nashoba Regional High School. The program has been in place for over 20 years and is integrated in the town of Bolton with the Bolton Ambulance Squad, Bolton Police and Fire. The Bolton ambulance squad is at or arrives at the scene. At no point is the cadet on the ambulance by themselves. The driver is a full EMT. The presenter recommends the project be moved from a special project to a standard offering to other schools. The advantage is the student receives training over a 3 years period-as an internship. Cadets responded to approximately 95 calls last year, 1/3 of those calls are intercepted by ALS, 2 calls by Life Flight.

Comment: this program makes sense but a concern is that high school students are being utilized instead of having to hire staff to be in the ambulance. By regulation an ambulance has to have 2 EMTS how can we allow the town of Harvard to only have 1 EMT on the ambulance?

1. Harvard Ambulance- Larry Miller – Director of the Cadet program for Harvard Ambulance

presenting. Dr. Steven Beckman-Medical Director present.

Harvard Ambulance was established in 1972 as a BLS service, it is 100% staffed by volunteers, 300 calls last year. The Cadet program is supported by the Fire Department, the Police Department and mutual aid with surrounding towns. The program began in 1998 to supplement the Harvard Ambulance Program. Potential cadets are screened-they must write an essay and interview to enter the cadet program. So far Harvard has had approximately 150 cadets go through the program. The crew on an ambulance always has 2 EMTs, one EMT is always in the back of the ambulance with the cadets. Three quarter of the calls have a cadet on the call.

Discussion: The question is should the committee recommend regulating this program through regulation or should the programs continue as a special project waiver?

Harvard’s program has 1 EMT in the back of the ambulance with the cadets. Bolton has one EMT on the ambulance as a driver, no EMT in the back of the ambulance with cadets.

C. Pozner: support the Bolton program however would recommend a certified EMT be in the back of the ambulance with the cadets. Response from presenter that Bolton would have to wait for 30 minutes for mutual aid to respond for this to happen.

Support in the committee for both programs but concerned that there is not adequate supervision for the Bolton Cadets. Should we recommend building criteria into regulations to ensure all programs meet the criteria suggested?

**Motion:** by Dr. Pozner to recommend the Cadet projects remain as special projects and that

the programs submit CQI data to the Department 2 times a year.

**Approved** - Dr. Bailey, Dr. Dinneen, Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,

Dr. Patterson, Dr. Pozner, Dr. Restuccia and Dr. Tennyson.

Abstentions-none, opposed-none.

Continued discussion: not having 2 EMTs (1 in the back of the ambulance), endorsing non

certified high school students to be the responder for the community-recommend a

change to the structure. Response-The cadets meet all requirements of an EMT.

**As an amendment-staffing of the ambulance-bring text of the waiver and review.**

Continued discussion: Bolton will wait for 30 minutes to get a mutual response. Do other

towns have this problem? Reported yes. Then how we staff ambulances is really the

concern and should be discussed.

**Motion** by Dr. Pozner to have the Committee re-review Bolton’s special project waiver.

Seconded-Dr. Geller. Yes –Dr. Geller and Dr. Pozner-2 No -Dr. Dinneen, Dr.

Restuccia , Dr. Tennyson, Dr. Old -4.

Abstentions-Dr. Bailey, Dr. Dyer, L. Moriarty, Dr. Patterson-4.

Motion failed.

e. MAI SPW-Should the Medication Assisted Intubation (MAI) special project (waiver) SPW

continue as a special project or be incorporated into the protocols as a Medical Director’s

service option?

Discussion- the services that participate have tight medical oversight on the project. Concerns

raised that other services would not have the same unless regulations essentially duplicated

the SPW.

**Motion:** by Dr. Geller to keep the Medicated Assisted Intubation (MAI) project as a special

project. Seconded by Dr. Dinneen.

**Approved** - Dr. Bailey, Dr. Dinneen, Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,

Dr. Patterson, Dr. Pozner, Dr. Restuccia and Dr. Tennyson.

Abstentions-none, opposed-none.

f. Community Paramedicine SPWs, Cataldo and EasCare

1. EasCare – One Protocol-Matthew Goudreau-Do Not Hospitalize and DNR Patients

The intent of this protocol is to work with MOLST/ hospice /palliative care patients who have a MOLST/Comfort care/palliative care only order in place. The Paramedic would assist the patient and caregiver on site at the patient’s end of life-this could be giving a medication (on site from the patient’s end of life care packet or holding a patient’s hand supporting the patient.

**Motion:** by Dr. Pozner to approve this protocol (EasCare’s Management of EOL/DNR patient protocol). Seconded by Dr. Geller.

**Approved** - Dr. Bailey, Dr. Dinneen, Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,

Dr. Patterson, Dr. Pozner, Dr. Restuccia and Dr. Tennyson.

Abstentions-none, opposed-none.

1. Cataldo Ambulance-Four Protocols-Gait Monitoring, Home Medication Administration Device, Temperature Monitoring and i-STAT- Dr. Jonathan Fisher

**Motion:** by Dr. Pozner to approve the EasCare Protocols (gait monitoring, home

medication administration device, temperature monitoring and i-Stat). Seconded by

Dr. Dinneen.

**Approved** - Dr. Bailey, Dr. Dinneen, Dr. Dyer, Dr. Geller, L. Moriarty, Dr. Old,

Dr. Patterson, Dr. Pozner, Dr. Restuccia and Dr. Tennyson.

Abstentions-none, opposed-none.

Meeting Adjourned at 11:20 am

Next Meeting: Friday December 12, 2014; 10 a.m. - 12 Noon at MEMA