



SAEMS

SOUTHEAST ARIZONA EMERGENCY MEDICAL SERVICES COUNCIL

Chair: Joshua Gaither, MD; Vice Chair: Chief Tom Brandhuber; Executive Director: Sara Perotti, ACNP-BC

SAEMS REGIONAL EMS COUNCIL MEETING MINUTES

Date: 10/15/2024

Time: 1000

Hybrid Format: ZOOM Teleconference and/or in-person.

Meeting location: Arizona Health Sciences Library

Room: Arizona Health Room: #4178

ZOOM Conference link below: (for video attendees)

<https://arizona.zoom.us/j/82961605824>

Meeting ID: 829 6160 5824

Dial by your location: +1 602 753 0140 US (Phoenix)

- I. Call to Order / Roll Call:** Voting Member Attendance: Josh Gaither @ 10:00
- II. Approval of minutes:** 6/18/2024 meeting: Review: Motion/Approved
- III. Financial Report:** Reviewed/discussed: No current vote required.
 - A. Financial Report/Accountant summary: Will be electronically distributed to voting members: *Awaiting final EMS Grant impact reports.*
 - B. Regional EMS Education/Certification Grant: FINAL/Closed: status report
 - C. AZDHS FY 2023-2024: End of fiscal year/Closed
 - D. FY 2024-2025 Contract/Budget: Received 3-year extension from ADHS
 - E. 2024-2025: AZHDS Financial/Grant decrease: Future financial concerns due to ADHS EMS operating fund decreases. Primary revenue source, moving violations.
- IV. Executive Directors Report:** Chief Garcia summarized each item/background.
 - A. ADHS Bureau of EMS and Trauma System-Strategic Planning Summit: Presentation of *DRAFT* Strategic Plan: Completed/8/14/24: **Attached*
 - B. ADHS Bureau of EMS and Trauma System Updates: **Attached*
 - C. Insurance: Social Service Contractors Indemnity Pool-General/Professional Liability
- V. Old Business & Sub-Region/Committee Reports**
 - A. Sub-regional Reports:**
 - i. Pima: PEMS-Tom Brandhuber/will send final EMS Education Grant summary report.
 - ii. Cochise: CCEMS: Matt Irlmeier: EMS funding showing positive benefits by increasing hiring/success rate. EMS in the Desert Conference, 1 day event, post-postponed until December 18th.
 - iii. Santa Cruz: SCEMS: Chris Renteria-7 personnel going to

paramedic class due to EMS Grant funding. Several personnel sponsored to SWTRC. Discussed ongoing IV fluids shortage.

- iv. Graham-Greenlee: GG-CMEMS: Dawn Lizarraga: No significant updates. Ongoing shortages of staff, with increasing call numbers. AEMT class ongoing due to EMS Grant funding.

B. Committee Reports:

- i. Regional Trauma Committee: Dr. Tang, meeting cancelled due to upcoming ACS survey.
- ii. EMS Medical Directors: Dr. Herbert on shift. Dr. Gaither provided report of 9/18 meeting. Discussed protocols and scope of practice for EMR's and critical care paramedics.
- iii. Providers Committee Report: Michael Schwartz-Discussed the ADHS presentation at most recent providers meeting.
- iv. Protocol Development and Review Report: Dr. Rice: No significant updates other than agenda items.
- v. Base Hospital Managers Report: Kevin LeClair: Reminder about ADHS Base Hospital Managers Summit.
- vi. Air Medical Committee Report: Mike Schwartz-Discussed safety for high-risk events/contingency planning. Radio communications discussed. ETA's updated/consistent for scene management. Summary email submitted. Agency updates: Shane Clarke now the Program Director for Arizona Lifeline, Andrew Merrill new Area Manager for LifeNet. Banner Air opened at Banner Casa Grande: Banner Air 4 and Air 5 available. AMC will define scene rendezvous for scene responses/proper use of HLZ's ensuring regulatory and legal compliance.

C. Pima County Health Department Report: Manny Montano: Report provided to council via email. Included to voting members. Situational update provided/including IV fluid issues due to Baxter facility damage from hurricane.

D. Arizona Department of Health Services Report: ADHS Representative: Chief Garcia discussed projects. EMS Portal, updating trauma registry, Trauma One product to be retired. Strategic Plan ongoing, remains in draft, has been presented to the regions. Dave Hanson: Naloxone leave behind program. New participants: Fry Fire District and Corona De Tucson. Link in chat for ADHS leave behind program. Rulemaking update: At last round of statutory meetings, able to confirm that submitted scope of practice updates will go into effect Jan 1st. Drug tables and scope of practice with critical care endorsement: already reviewed and approved, will also go into effect Jan 1st, 2025. ADHS and Medical Directors will provide updates and communications regarding the "go live" for questions. Pending GRC Articles 2-4, 9, changes to EMR training programs and paramedics with a critical care endorsement. Dave discussed public health, public safety summit regarding available resources and partnerships. 2024 Opioid Public Safety Summit (ticketstripe.com). Shelley Bissell commented on TEPI vacancy.

VI. Data & Quality:

- A. Funding/Research: Discuss potential grant options: No specific grants/funding.

VII. Kramer Scholarship submissions:

A. Applications: Submitted for review/present.
Review/Approved. Submission: Michelle Robbins/Fry Fire District.

VIII. New-Old Business/Action Items:

A. PDR Protocols/Procedures for review/approval:

- a. Critical Care Adult Triage Protocol: Sara commented that once Dr. Rice can discuss the protocol and its intent. TMC should be given the floor. New item, drafted with input from Provider committee. Protocol taken through PDR, then approved by EMS Medical Directors Committee. Dr. Rice discussed protocol. Provided as attachment to council/members for review. Motion to approve/Open to discussion. Mike Schwartz discussed that Providers has not yet reviewed/approved. Dr. Rice discussed that Providers has reviewed it. Mike Schwartz mentioned that this was not reviewed/discussed/approved at Providers meeting. Providers did not get a chance to review/approve. Sara commented that given the information provided by Providers, this protocol should not be voted on in this meeting. Providers had to reschedule their meeting, thus, did not review/approve this protocol, prior to being sent to EMS MD for review/approval. TMC letter shared: Julia Strange (TMC) representative, VP of external affairs TMC. Respect the councils' activities: point of their letter, discussed when standardizing, it is important to standardize in concert. Not defined in statute or regulations. Dr. Cooper (TMC) reiterated what he brought up at EMS MD, TMC Rincon was not yet open at first consideration of this protocol. Requests feedback and follow-up from the providers about bypassing patients. Concern that providers will be confused by designation. Dr. Tang (BUMCT): asked volume and subtype of patients. Dr. Rice does not know volume, likely represents relatively small group. Dr. Tang believes that what is ultimately best for patient should be at the center of the discussion, believes patients should be sent to closed most appropriate hospital if needed, versus needing secondary transfer. Dr. Cooper: reiterated that there is no data to support that these patients need to bypass, or PPV to benefit patients and the systems to better understand if there is an issue or patient impact. Discussed under/over triage. Need criteria to be established and reviewed prior to making a widespread protocol change without system impact information. Concerns about unintended consequences: need data and monitoring plan. Kevin LeClair: discussed the NWH has multiple hospitals impacted by this type of protocol. Discussed the true capabilities with their facilities and they type of patients they can safely manage on an inpatient side. Kevin understands TMC concerns and that it should be monitored for proper clinical decisions when utilizing this protocol. But believes monitoring and QA should be implemented as part of the design. Greg VanAlstine: likes the document and supports and will approve. Tom Brandhuber: asked about feedback from other hospitals. Echo's what Chief VanAlstine says that this should be communicated to the crews and facilities. Discussed Maricopa has already solved this issue, we (SAEMS) do not need to reinvent the wheel. Dr. Cooper: if problem with inappropriate behavior of EMS providers, that should be addressed directly, regardless of policies and procedures.

Reiterates the need to follow data before decision making. Believes this protocol jumps ahead on triaging of patients. Kevin Venos: from rural perspective, he is not sure his providers will have ability or critical thinking for several factors regarding which facility patients should go to. Also risky to add transport time. Dr. Gaither discussed that the protocol ensures that there is a 30-minute time notation regarding. Dr. Spaite mentioned that the council can act on this if they so choose (approve/send back/not approve), due to Robert's rules of order. Discussed outcomes are unknown, poor research and QA/QI confused with cause/effect. Dr. Rice: discussed that there are similar protocols across the country that are similar. Dr. Gaither discussed that there is an established review of all protocols: discussed the process. Dr. Gaither asks that we propose that the Chair and Vice-Chair should give their opinion about where this should go. Chief VanAlstine feels that it would be appropriate to approve. Mike Schwartz believes this should go back to the Providers and agencies, namely rural to have a voice and impact. Mike feels it should go back to Providers for review/discussion prior to vote. Mike discussed the first formalized version was most recently sent to Providers but was tabled due to rescheduling of Providers meeting. Dr. Rice comments that it has been seen by multiple groups for four months through multiple committee meetings. Dr. Gaither proposes tabling this, send back to Providers, he will attend and once approved, can be sent to SAEMS voting members for electronic approval. Dr. Spaite believes the process was iterative and interactive, he has a problem with the fact that fall break meant that Providers could not meet. Dr. Spaite believes that this protocol, given the complexity and the differing points on all sides, it should be sent back through the system for review and approval of all requisite committees. Dr. Gaither calls for vote: Abstain: Cochise County and Air Medical, Base Hospital Managers will obtain. Yay (a few)/Nays (1): Per Dr. Gaither, protocol passed per Dr. Gaither.

- b. CPAP BIPAP Protocol: Review: Vote/Approved.
- B. SAEMS Regional Council: Open seats:
 - a. Public EMS Provider URBAN: Nominations open
 - b. Emergency Preparedness/Management: To replace Shane Clark- Nominations open: Received: Daniel Duchon, Nominated by Kevin Venos. Not voted on per chair.
- C. SAEMS DHS: Trauma and EMS Performance Improvement (TEPI) Prehospital Representative: To fill seat vacated by Dan Modrejewski-Nomination received: Christopher Falcon (Banner University-Tucson). Vote/Approved.
- D. SAEMS DHS: Pediatric Advisory Council (PACES): Nominations open. Nomination received: Dr. Gaither for, Rachel Munn. Motion/second: Vote/Approved.

IX. NEMSIS 3.5 update: Updates

X. 2025 Draft Calendar: Open

XI. Upcoming Events/Important Announcements:

- A. Banner University Trauma seeking recommendations regarding date of 2025 SWTRC.

XII. Call to the public:

- A. Tucson Medical Center Representatives: Critical Care

Adult Triage Protocol concern. **See attached/submitted letter.*

XIII. Education Announcements:

A. EMS Base Hospital & Medical Direction Seminar: October 18, 2024: Google Meet and in person: Flagstaff Medical Center: 0900-1300.

XIV. Adjourn: 1144

MINUTES