



W e s t c h e s t e r R E M A C

General Meeting Minutes - October 20, 2008

Date: October 20, 2008
Time: 9:00 AM
Location: Westchester County Department of Emergency Services
Chairman: Dr. Nicholas DeRobertis, MD

MEMBERS

Dr. Mark Silberman
 Dr. Ron Nutovits
 Dr. Carlos Flores
 Dr. Karlene Chin
 Dr. Robert Marcus
 Dr. Emil Nigro
 Dr. Joseph Ponticiello
 Dr. Richard Marino
 Dr. Nicholas DeRobertis
 Dr. David Goldwag
 Dr. Tim Haydock

AFFILIATION:

Community Hospital at Dobbs Ferry
 Hudson Valley Hospital Center
 Lawrence Hospital
 Mt. Vernon Hospital
 Northern Westchester Hospital
 Phelps Memorial Hospital Center
 Sound Shore Medical Center
 St. John's Riverside Hospital
 St. Joseph's Medical Center
 Westchester Medical Center
 White Plains Medical Center

ATTENDANCE

Present
 Present
 Present
 Absent
 Absent
 Absent
 Alt – Dr. L. Rociunas
 Absent
 Present
 Present
 Present

NON-VOTING MEMBERS

VACANT
 Dr. Joli Yuknek
 Dr. Richard Gallager
 VACANT
 Roland Faucher
 Chief Anthony Chiarlitti

Medical Specialty (Trauma)
 Medical Specialty (Pediatrics)/WPHC
 Medical Specialty (Psychiatry) / WMC
 EMS – Proprietary
 EMS – Voluntary / MVFAVAC
 Police / Pleasantville PD

VACANT
 Present
 Absent
 VACANT
 Present
 Excused

GUESTS

Ray Cordi
 Maria Pico
 Dr. Heidi Cordi
 Dr. Michael Canter
 Kevin Gage
 Richard Robinson
 Scott Moore
 Dr. Michael Guttenberg
 Malcolm Dixon
 Katherine O'Connor
 Michael Volk
 Dan Olmoz
 Anthony Sutton
 JT Flick
 Donald Cottle
 Ted Tully
 Daniel Blum

Empress EMS
 American Heart Association
 CHDF / NYPH
 Greenwich Hospital
 NYSDOH BEMS / MARO
 NYSDOH BEMS / MARO
 Port Chester Rye Rye Brook EMS
 St. Joseph's Medical Center
 TransCare
 WCDES
 WCDES
 WCDES
 WCDES
 WCDES – OEM
 Westchester EMS
 WMC
 WREMSCO

MEETING

Meeting was called to order at 9:20 AM by Chair Dr. Nicholas DeRobertis. Initially it was determined that a quorum was not present. Dr. DeRobertis continued with the discussion of some items not requiring a vote. The minutes from the last meeting were not available for review.

OLMC ISSUE

Katherine O'Connor reported that approximately about two weeks ago the Regional EMS Office was contacted by an OLMC physician regarding an incident involving OLMC orders. A paramedic called in on a land line to one of our hospitals requesting narcotic use. The paramedic identified himself by agency not by name. The OLMC physician granted the order but had questions regarding the case. The paramedic and the patient never arrived at the hospital. The OLMC physician went about attempting to locate the unit by going through the agency that had been identified, but that



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service had unit attending to a call in the area or met the call description. The Regional EMS Office queried all the agencies regarding the possibility that it was a paramedic working for another agency, not all the services had been heard from as yet but to date, none of them had a call during that time period or had a patient transported that met the criteria or the patient presentation that the physician had received on the phone. .

Discussion that OLMC physicians need to obtain a clear understanding of whom they are talking to when providing OLMC.

WAVE FORM CAPNOGRAPHY (WFC)

Graphs representing the response to surveys received to date were distributed to the members. Sixteen agencies have returned to the survey so far (14 ALS, 2 ILS) and the Regional EMS Office is waiting for 3 more agencies to respond. So far it seems that most of the services have the ability to provide WFC already, but those who do not may see a time delay in obtaining the technology (2 ALS, 2 ILS). Also some of the services are not carrying advanced airway devices other than ETT. If services do not have WFC after the deadline, they may only use and/or monitor advanced airways other than ETT. There has been no word on the SEMAC advisory statement expected to be approved by the NYSDOH Commissioner and the projected implementation date for the mandate continues to be 1/1/09. A final report will be given next meeting.

Discussion regarding the size of the EMS systems that do not have WFC. Call volumes were not immediately available but it was estimated that the services in question cover small to medium-size communities.

(Announced by the Chair that a quorum was now present.)

>> All right, we also have here Maria Pico, the senior director of State Health Alliances, American Heart Association, who wants to talk to us about something that's on our sheet that's called Mission: Lifeline survey. And I'm going to give her a few minutes.

AHA Mission LifeLine

Maria Pico, Senior Director of State Health Alliances for the American Heart Association (AHA), presented information on a new program to address barriers in providing STEMI care. The AHA has developed an EMS assessment survey that it is rolling out statewide to collect data on what these barriers may be. The AHA would then like to focus its efforts on helping EMS overcome these barriers. The survey will be offered for completion in paper and electronic form. The AHA has been working in collaboration with other state partners including the NYSDOH BEMS Ms. Pico was requesting assistance from the Westchester REMAC in supporting the survey and co-signing the notification letter.

Katherine O'Connor reported that all of the program agency coordinators and directors were invited to meet with the representatives from AHA in regards to the program at Vital Signs in Buffalo, and were directly asked for their assistance and opinions regarding this initiative. A couple things that were identified as the document was reviewed was that there seemed to be a number of questions that could potentially be answered at a regional level and would not necessarily be something that an individual agency would have access to that information or would be able to answer it easily. Another thing was that some of the terminology that was used if it was sent to all agencies and not just ALS agencies, would they necessarily know what a PCI center generally, because it wasn't something that was in the day-to-day vernacular of a BLS service. Various regions indicated that they would be able to support this effort electronically and help in getting the word out, but indicated to the AHA representatives that a letter of support such as the sample one that was pre-drafted for would be something that could only come from the REMAC or the REMSCO. It was suggested that they come and speak to the REMACs directly.

Discussion and questions regarding the plan for the data being collected. Ms. Pico stated that the information will be added to state and national data collected. The AHA will make this information available on an aggregate level in general or by state. It will also be available to local oversight bodies on a more local level, but will not be disseminated publicly without consent of the medical director and executive director and all other bodies within the Westchester. Concerns were raised regarding the conclusions that will be generated through a survey like this one and the attention they will receive as it is from the AHA.

Discussion and questions regarding who the questionnaire should be sent to. The survey as developed does not allow the agency to be clear regarding their approved level of service. Many questions appear to no apply to BLS agencies. Concerns were raised that the right questions were asked of the right agencies. Due to the tiered system of BLSFR, BLS, ALSFR and ALS response agencies, this data could end up skewed. Asked that Ms. Pico clarify exactly who is intended to be queried.



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Discussion and questions also regarding the need for a memorandum of understanding with the REMAC. The survey begins with a statement of understanding that must be acknowledged regarding the use of all the data provided and the need for explicit permission for agency-specific data to be released.

Issue tabled pending more information.

SUBCOMMITTEES

EVALUATION – The remediation process for the previously reported disciplinary issue is underway.

SPECIAL COMMITTEES

HUDSON VALLEY REGIONAL TRAUMA ADVISORY COMMITTEE (RTAC) – Recent meeting cancelled.

HUDSON VALLEY / WESTCHESTER HELICOPTER COMMITTEE – Next meeting date has not been set.

HOSPITAL DIVERSION

Graphs representing the diversion rates of all the hospitals from January through September were disseminated. As in the past, the data was blinded so the identity of each hospital was protected. Dr. DeRobertis has still had no luck in getting on the agenda at NORMET. The REMAC may need to sponsor a meeting here with all the CEOs.

EMERGENCY MANAGEMENT

JT Flick from the Westchester County OEM reported on the activities of the Health and Hospital Workgroup that has been formed by the OEM. The group is looking at MCI management issues involving health care organizations. To improve communications between OEM and the hospitals during an emergency, OEM would like to add a column on the diversion website to include the types of ER beds available by patient condition (ie green, yellow, red). The intent is that an MCE/MCI alert will be sent through the VOIP phones and ask each ER to enter what their bed availabilities are. The website will be password protected to ensure that there is no unnecessary access.

Discussion regarding access to specialty services/resources. Concerns that the field triage is appropriate. It was indicated that the Mutual Aid Plan was due to be updated and it will need to include a training piece. Discussion also of possibility of reviewing all the hazard analysis plans being done by the hospitals for the NYSDOH to ensure a more accurate regional map of concerns for pre-planning purposes. Question of whether it should be extended out to EMS agencies to voluntarily complete an analysis.

Mr. Flick suggested that the program can be set up as a pilot and then drilled as a table-top to work out any other concerns.

COMMUNITY HOSPITAL AT DOBBS FERRY – Dr. Silberman reported on the plan regarding Dobbs Ferry Hospital. It will become part of the Riverside Health System after December 31st and will come under the auspices of St. John's Riverside Hospital. Per the plan of the Berger Commission report it will become a "pavilion." Dr. Silberman discussed the ER services at CHDF as being unchanged and the ER will interact with EMS the same as always. Patients who need to be held longer-term will be transported out to another facility.

Discussion regarding the need to change in OLMC. Questions rose regarding the number of in-patient beds that will be available after the change. Dr. Silberman reported that that number had been due to decrease but that is now on hold. ICU/specialty care will be a 4-bed unit.

Discussion/questions regarding the plan to move patients out of the facility that need to be transferred. Dr. Silberman stated that GPD was doing a good job of triaging the patients appropriately as to who could be seen/treated at CHDF. Specialists are still on-call and can respond to the facility as needed. Concerns still that there will be an increase in the need for a meeting to discuss coverage. Dr. Guttenberg to obtain the NYC transport policy regarding use of 911 ambulances for acute interfacility use.



NOTICES OF INTENT

A report of PAD notices received since the last meeting was unavailable. It will be provided at the next meeting.

APPLICATIONS FOR SPECIAL PERMISSIONS (I.e. Albuterol, Mark I, EMTD)

No applications for special permissions were received.

OLD BUSINESS

PROTOCOLS – To date no request has been made from the NYSDOH for additional information. It is assumed that they will be reviewed at the December SEMAC meetings.

NEW BUSINESS

AIR MEDICAL SERVICES – Commissioner Sutton expressed a concern regarding whether there should be more QA done on helicopter requests; whether or not the transport was necessary. This is a concern especially in the light of increasing numbers of helicopter accidents. Dr. Goldwag stated he would bring the concern to Dr. Stuhlmiller. Ted Tully stated that other systems like Maryland are much more permissive than NYS.

AHA FOLLOW-UP – Ms. Pico reported back that all transport and ALS services should be queried. The comment box can be used to indicate agency level of service. Discussion regarding adding the disclaimer on the cover page to the cover letter. The Regional EMS Office will assist in re-drafting the letter and creating a guidance document before distribution of the survey.

NEXT MEETING – Session was adjourned at 10:30 am. The next meeting is scheduled for Monday, October 20, 2008 at 9:00am.