# Spokane County EMS & Trauma Care Council Meeting Minutes February 13, 2024, 9:00 a.m. – 10:30 a.m. Spokane Fire Training Center, Classroom A

EMS Council Vice Chair, Dan Williams, called the meeting to order and those present were noted on the attendance sheet.

#### Members/Alternates/Ex-Officio Present:

Robin Albrandt, Josh Ambach, Jim Akramoff, David Baird, Jack Busch, Dr. Greg Cover, Tom Chavez, Ashley Christoff, Dr. Maika Dang, Dr. Travis Dierks, Dr. Joel Edminster, Dr. Cody Laverdiere, Randy Olson, Paul Priest, Jeff Reid, Dan Williams, Chris Wyrobek

## **Guest Present:**

Scott Cosner, Dr. Madeleine Geraghty, Zack Holmes, Deanna Jones, Tim Loncon, Denise McCurdy, Emily Mercer, Dr. Mike Metcalf, Bethany Osgood, Lindsay Payton, Beth Perkins, Shaun Pitts, Treena Russel, Leah Salmon-Conroy, David Sewell, Jim Walkowski, James Young

## **EMS Office Staff Present**

Berkley Van Hout, Office Administrator & County Coordinator

**MINUTES:** Approval of January 2023 minutes **Action:** It was M/S/P to approve the minutes.

## **CHAIR'S REMARKS:** Dan Williams (Vice Chair)

- ➤ Hospital Status Report
  - Providence Holy Family: Scott Cosner stated that the no divert policy is going well. There have been minor complaints, but overall volume has not had significant change.
- **BLS** Report:

Dr. Travis Dierks stated that the goal moving forward is for the Protocol Committee to adjust protocols to define which protocols and skills BLS providers follow in the manual. The Protocol Committee Chair, Tom Chavez, stated that he has had interested BLS personnel reach out to be included in Protocol committee invites. If agencies have interested BLS providers, please reach out to Tom to be included in the Protocol process.

## TREASURER'S REPORT: Jack Busch

Financial reports for January 2023 Jack shared the financial reports.

**Action:** It was M/S/P to approve the financial reports.

- > Finance Committee
  - Investment Account/High Yield Savings Account

    Jack shared that the Executive Committee has begun looking into adding funds from the Council's current savings account into a high yield savings account and/or a brokerage account. Options will be presented at the next Council meeting in March.
  - Executive Board Funding Approval

Jack stated that last year, the funding request process was created for agencies to request funding from the EMS Council by filling out a Funding Request form which is reviewed by the Finance Committee, and then voted on by the Council. The Executive Committee requested a cap amount that they can approve without going to the Council for a vote, and Jack suggested a \$3,000 cap. Tom Chavez explained that any annual funding such as subscriptions could also be voted on by the E-Board if it was under the chosen cap amount. Following the discussion, it was agreed upon that the Executive committee can vote on funding request under \$5,000 and requested that an appeal process be made for

requests that get denied by the E-Board to be reviewed by the entire Council for approval. **Action:** It was M/S/P to approve the Executive Committee voting on any funding requests of \$5,000 or less. The finance committee will work on creating an appeal process.

## • County Ultrasound Training Request: Cheney FD

Cheney Fire Department submitted a funding request for \$1,300 for a Point of Care Ultrasound (POCUS) training course for interested Paramedics in Spokane County. Dr Travis Dierks gave an overview of the course and stated that the training course would be limited to paramedics only during the initial training of this program. The course would be available to any medic in the county, with the obligation to have their agencies Physician Advisor or somebody that can oversee and review scans and complete follow up for QA. For training, Dr. Brooks Lasalle from Providence Sacred Heart has agreed to help with training. The course would be 2 days, approximately 8 hours per day. Butterfly, a cloud-based platform for scans to be uploaded, is also willing to send representatives to demo their program. The funding request is specifically for the training aspect, not for the purchase of the devices for any agency. Chief Chris Wyrobek (SCFD8) asked if this program would have ongoing subscription fees, which there would be. There is an option for the EMS Council to create a subscription with up to 100 profiles, or the involved agencies would purchase their own subscriptions. Dr. Dierks amended the request to \$1,700 to cover the Physician training of the course.

**Action:** It was M/S/P to approve \$1,700 to fund a POCUS training course. The course will be held on March 11-12, 2024, 12-4pm. More information about the course and a link to sign up will be sent out.

### **OLD BUSINESS:**

## > Train the Trainer Update:

At the 2023 annual meeting in December, the EMS Council approved to fund up to 20 individuals from multiple Spokane County EMS agencies to attend an Airway Train the Trainer course, and to fund the course host coming to Spokane. Agencies have submitted their lists of interested individuals to the EMS Office, and Tom Chavez stated that he has moved forward with contacting the course host to get a date selected. Some agencies had requested to send more individuals, but the EMS Council approved up to 20 individuals only for discounted pricing. If agencies have additional personnel that would like to attend, they will be able to pay and register directly through the registration link once the course is set up. Information regarding the course dates and location will be sent out once available.

## > Frostbite: CHAS Street Medicine-EMS-ED Handoff:

At last month's meeting, Dr. Manriquez from CHAS gave a presentation on frostbite and lead a discussion for ways to improve patient care between the street medicine team, EMS transport, and hospitals. Dr. Manriquez created a handoff form that the CHAS street medicine team would complete on scene, which would be handed off to EMS, and then left with the patient when they arrive at the hospital. The Council reviewed the form and stated that the form would be helpful if the street medicine team is responsible for filling out the form.

# ➤ Hospital No Divert Policy Update:

Tom Chavez gave an update regarding the newly in place no divert policy for the 5 local hospitals that went to effect on January 31st. A workgroup made up of hospital representatives, AMR representatives, and EMS Council representatives have met weekly to discuss the progress and continue planning for improvement. After the first week of no divert, hospitals reported that census slightly decreased, but picked up during the second week. Tom brought up two major concerns that the workgroup had after the first 2 weeks of the policy being in place. The first concern was having no appropriate contact information for updates on hospital status, as hospitals are contacting transport crews directly giving status updates regarding wait times. The no divert workgroup will begin working to create a process for hospitals to send updates to transport agencies and other local hospitals as a 'heads up' but EMS transport will still determine patient

destination based on the Spokane County protocols and the WA State guidelines for determination of patient transport destination. The second concern was related to direct to triage status, and hospitals are working on a process and guidelines for direct to triage to move patients quickly and to get the most critical patients where they need to be. Dr. Edminster brought up that there are two EMS bills in legislation, and one includes House Bill 24-66 which will require a 30minute patient handoff from transport agencies to the hospital if passed. Dr. Maika Dang added that AMR has tracked transports to hospital data since the no divert policy went into effect and reported that average time for delays have remained stable, but there has been an increase in the total number of delays and requested that the Council come up with ideas to help shorten the transfer of patient care at the hospital. Dr. Dang also stated that it was requested by the no divert hospital workgroup that the EMS Council create a formalized process for direct to triage for all hospitals to create standardization of what a triage appropriate patient means. There was a presentation at the NAEMSP Conference that shared a direct to triage protocol that Dr. Dang offered to share. Tom emphasized that hospitals have been working well together and moving patients within the hospital to clear beds in the ED, but space remains to be a challenge. There is currently no end date for the no divert policy.

## **NEW BUSINESS:**

## ➤ County FOG-MCI Chapter: Chris Wyrobek:

Chief Wyrobek shared an update that the MCI chapter of the County FOG has been put on pause due to changes in triage procedures. The Fire Chiefs are requesting approval from this group to include the DMCC-MCI workflow chart as an appendix in the FOG chapter to be used as a handoff in the field. The SALT triage update will be a key factor in finishing this chapter. The Ops group has begun looking at the chapter for Incidence of Violence, which will also relate to the MCI chapter. Chief Wyrobek stated that the Fire Chiefs are looking for feedback from hospital partners regarding the status of 800-megahertz radio hardware in the emergency departments to have consistent and reliable radio systems for communication in the event of an MCI.

# > Dispatch Run-Card for Machinery Rescue: Michael Forbes SFD

Mike explained that the Region 9 Tech Rescue team, which is made up of Spokane City Fire, Spokane Valley Fire, and SCFD9, each have a dedicated apparatus with a variety of tools for machinery rescue. The team provides annual and small group trainings for rescue responses and have recently revised dispatch codes for tech rescue response. Typically, there is a large response for these dispatch codes, but Mike stated that there have been instances that tools are needed in the emergency department and a full tech rescue team response is not appropriate. Mike shared that the Tech Rescue team is currently working with SREC to create a separate response code and run card that would be specific to the addresses of the 5 local hospitals to get one apparatus to respond rather than the full response team. The goal is to create a run card and a training program for hospital staff. This process is expected to go live by March or April 2024. Any questions can be directed to Mike Forbes.

## Recently Approved Training Course Applications:

- EMS Connect: Initial EMT- Supraglottic Airway Endorsement Course (02/27/2024-05/05/2024)
- Providence Health Training: Initial IV Therapy Endorsement Course (03/04/2024-04/05/2024)
- Providence Health Training: Initial EMT- Supraglottic Airway Endorsement Course (03/05/2024-06/22/2024
- Providence Health Training: ESE Instructor Course (03/15/2024)
- Providence Health Training: Initial AEMT Course (03/29/2024-08/31/2024)
- Providence Health Training: Initial EMT- Supraglottic Airway Endorsement Course (04/18/2024-07/30/2024)

### **PROTOCOL COMMITTEE:** Tom Chavez

- ➤ Protocol Committee update:
  - Handtevy Update:

Tom reported that the Handtevy app update is complete, and agencies should have access to their account under the Spokane County EMS Council account. If anyone has issues with their account, please reach out to Tom. The EMS Council has the only administrative rights over the account, but Handtevy is working on creating different levels of administrators which would allow agencies to have administrative rights to make edits for their individual agencies. The current Spokane County Protocol app subscription will expire in May 2024, and unless the EMS Council decides otherwise, the protocol app will no longer be used once the subscription ends this year. SCFD10 and SCFD13 requested to be added to the Handtevy account. Tom will reach out to get a quote to add the two agencies to the account.

- SALT Triage/MCI Update
  - The Protocol Committee will continue to work on the SALT triage protocol and there is an MCI workgroup that will discuss protocols and begin looking at the logistics for a county wide MCI training.
- All new and revised protocols since September will be reviewed for approval by the EMS Council at the next meeting on March 12<sup>th</sup>.

#### **REPORTS:**

- **EMS WAC Revision:** no representative
- ➤ <u>Inland Empire Fire Chiefs:</u> Chris Wyrobek reported that the last meeting was held on February 1<sup>st</sup> and stated that most of the discussion was centered around the current legislative short session, discussion regarding SREC and the new CAD software, and research going on with the MDC software options. The Critical Indecent Management team is working on upcoming training courses and wildland team rosters.
- > SREC Board: Cody Rohrbach not present
- East Region EMS & TCC: Tamara Drapeau not present.
- ➤ <u>SRHD</u>: Robin Albrandt reported that the Spokane Regional Health District's health advisories are posted on their website which include a series of the <u>Measles outbreak in Southwest WA</u>, and <u>an increase in syphilis cases</u>. The Long Term and Congregate care COVID-19 updated and non-COVID outbreaks for RSV, Flu, and Shigella was sent last week. If you would like to receive these updates, please reach out to Robin. The Health Equity and Disasters task force is in the process of finalizing surveys to help better understand the barriers and challenges in helping those with access and functional needs during a disaster. The survey will be shared once it is finalized. Robin also reported that SRHD will be hosting an ICS 300 with a public health focus on April 16-18. If interested, reach out to Robin for registration. SRHD is also hosting a G 402 NEMS overview for executives, seniors, and elected officials on April 24<sup>th</sup>. Lastly, SRHD will be placing a kiosk at the STA Plaza that will offer free COVID-19 and flu test, and Naloxone in addition to other health care supplies. A link for more information about these kiosks is here.
- ➤ Curriculum & PM Advisory Committee/Providence Health Training: Jim Akramoff reported that applications for the next cohort starting in October are now open. The application process is changing as there will be an application deadline which will likely be at the end of June or early July, and the testing and interview process will begin from there. The next PM Advisory Committee meeting will be April 4<sup>th</sup>.
- > FAFB: No representative. Withdrawing from the EMS Council.
- > QI Committee: Dr. Nania not present
  - Today's meeting agenda includes:
    - Protocol committee

### ANNOUNCEMENTS/OTHER BUSINESS:

- **EMS** Connect Classes for February:
  - 02/26/2024 at 1:00pm "Asthma/COPD & Future of EMS" with Dr. Travis Dierks and Dr. Joel Edminster
- > Providence Live at Nite Classes for February:
  - 02/13/2024 6:30 pm "Language Matters" with Carrie Gigray MSHS/ Paramedic
- Zodiac Trial: Dr. Madeleine Geraghty from MultiCare Deaconess summarized the Zodiac Trial which was presented at the International Stroke Conference. The trial has not yet been published but was presented as one of the most important trails that was presented at the conference. The trail focused on large vessel stroke patients awaiting mechanical thrombectomy and compared patients that had a 0-degree head of bed positioning to patients with a 30-degree head of bed positioning and looked at primary endpoints of neurological worsening and found that patients with a 0-degree head of bed had only a 2.2% chance of worsening either greater than 2 or greater than 4 on NIH stroke scale, which is used to determine stroke severity in the Hospital. Patients with a 30-degree head of bed positioning had a 55% chance of worsening by 2 or more points. Dr. Geraghty emphasized that these results are pre-publication but felt it was important to share. Once the trail is published, Dr. Geraghty will bring the trial back to the EMS Council and will bring this trial to Physicians at the hospital to consider changing the head of bed positioning. Dr. Cover asked if these considerations should be used by transport agencies for all stroke patients and transport, and Dr. Geraghty responded that there was not data available to change the protocol for all neurological patients yet.

MEETING ADJOURNED.