



Flathead City-County Board of Health

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FCEMS Advisory Committee Meeting Minutes

Held February 25, 2008, 6-8pm

2nd Floor Conference Room, Health Dept. – Earl Bennett Bldg.

Meeting Agenda

1. Review and approve the latest, final draft FCEMS regulations:

- 2 - EMS Advisory Committee
- 10 - Levels of Prehospital Care in Flathead County

2. 911 Update and timing for input – Mark Peck, O.E.S.

3. Update on BLS Transport and ALS improved coverage.

4. Open forum:

Assess the current direction of the advisory committee.

Future directions and ideas from members for EMS needs, policies, or other issues affecting EMS.

Agenda Item 1.

1. FCEMS regulation 2 – EMS Advisory Committee was reviewed in final draft form.

Discussion began regarding the meaning and implementation of consensus building and voting. (No changes to the text were requested.)

An addition will be made stating that the meeting minutes will be “made available”. FCEMS will maintain a distribution list for email or paper mail of the minutes in addition to posting the meeting minutes on the FCEMS website.

The meaning and intention of the three “representatives” of the different EMS agencies was discussed primarily centering around the EMS licensure and experience level of that representative. (No changes to the text were requested.)

Section 2 c will be reworked to represent that the Board of Health will consider the nominations for the voting members. A clarification of the nominating and selection process was requested.

This regulation will be on the next meeting agenda for review and approval.

2. FCEMS regulation 10 – Levels of Prehospital Care in Flathead County was reviewed in final draft form.

The point was made to clarify the definition of BLS with specific ALS skills to include the fact that the skills referred to are endorsements. This definition will be updated.

The BLS definition will change to EMT-B or EMT-FR.

The procedure explaining the assignment of ALS services to ALS areas based on shortest response time was discussed regarding the current situation and the transition to the Computer Aided Dispatch (CAD) system implementation.

The second paragraph will be simplified regarding dispatch at ALS or BLS. There was discussion about the language regarding transport agencies.

Discussion continued about the communication protocols and rules for notifying dispatch and medical control in the event of a BLS transport agency responding at an ALS skill level. The language will be updated for clarification.

This regulation will be on the next meeting agenda for review and approval.

Agenda Item 2.

Mark Peck gave the following updates and comments:

Demonstrations of Emergency Medical Dispatch by the company PowerPhone were underway and also scheduled for 10am Tuesday.

A draft RFP will be released for the CAD system with the intent to purchase by June 1, 2008. We did not get the Assistance to Firefighters Grant for this purchase, however, money was found from other sources to proceed with the CAD purchase. The new trunk radio system is scheduled to go online Fall 2008. This will require extremely detailed configuration work. A communications system engineer position is currently advertised.

The biggest issue for OES is the new CAD system. Radios are workable now. Mark is planning on releasing an RFP for a new building soon, but no money is allocated yet for this.

The process and definition of protocols for CAD should start immediately.

Agenda Item 3

Marty Boehm showed the eight minute ALS response map and explained how it was constructed. It was noted that the national standard for ALS eight minute response times pertained to 90% of the time. There was some discussion about actual response times as compared to those computed for map-making based on route and speed limits. The relative importance of BLS transport compared to ALS was discussed. Marty will continue evaluation and compilation of the factors and situation to improve valley-wide EMS coverage.

A discussion of the money received and allocated from mill levies included some recommendations for financing requests to, preferably, exclude salaries and possibly relate to special projects when budgets may be exceeded.

Interest was expressed in the statistics for ALERT calls versus stand-downs and no-transport volumes.

Agenda Item 4

The recommendation was made to use the Advisory Committee forum to discuss budget planning. One advantage is the improvement in awareness by various units/agencies which may be affected by others' budgets and plans.

The issue of billing and payment for services and supplies was addressed regarding the problems encountered with "split billing" and having each agency involved in a multiple or sequential response getting paid for their contribution/effort/costs.

Questions were raised about Conflict Resolution and the process to resolve issues with dispatch, mutual aid, and inter / intra district protocols. Also raised was the question about the extent of the authority of this committee.

We agreed to try to get the voting members nominated by the next meeting. FCEMS will attempt to contact each unit to confirm their awareness of this goal.

A quick overview of comments from Neil Heino (who was unable to attend this meeting) was presented:

1. We have not received a single short form trip report to date.
2. Ambulance reports only get to medical chart about 50% of the time.
3. Would like an Email and or mailing list of response units to update them on patient outcomes (Trauma).
4. Neil will be developing a PI project that will track trauma patients:
 - a. Scene times
 - b. % of patients with IVs in the field
 - c. Full and modified trauma activations
 - d. Long extrications

This will be done through trauma registry so only data on trauma patients is involved. Still, this should be a good snapshot of EMS activity. Neil hopes to talk to NVH to get data from them also.

Would the units like anything else to be tracked?

There is the continuing concern about non-transporting units' information getting to the chart and them getting credit for their contributions.

WRTAC is working on designation of facilities of where head injury patients should go.

Attendees:

Scott Alexander	Whitefish Fire
Rob Bates	FCEMS Medical Director
Art Bielz	Smith Valley Fire
Marty Boehm	FCEMS
Randy Brodehl	Kalispell Fire
James Brower	Marion Fire
Rod Dresbach	West Valley Fire
Mary Granger	Lakeside QRU
Gary Mahugh	Creston Fire
Ken McFadden	NVH Medical Director
Wayne Miller	Board of Health
Mark Peck	Office of Emergency Services
Mike Rensmon	Three Rivers EMS

Joe Russell	Health Officer, Advisory Committee Chairman
Lela Sistok	West Valley Fire
Gary Solomon	FCEMS
Wendy Stefaniak	Badrock Fire
Bill Taylor	Bigfork Ambulance
Eda Taylor	Bigfork Ambulance
Lance Westgard	Three Rivers EMS
Craig Williams	Evergreen Fire