



**Emergency Medical Services Council**

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**Executive Committee**  
**Mon., Sept. 11, 2017, 1:00 p.m. - 2:30 p.m.**  
**Edina Fire Station #1**  
**6250 Tracy Avenue, Edina, MN 55436**

**Draft Summary**

<b>Present</b>	<b>Absent</b>
1. <b>Pat Coyne, RN, EMT-P</b> , EMS Council Chair 2. <b>Mike Hughes, EMT-P</b> , Ambulance Service Personnel Subcommittee Chair 3. <b>Michelle London, MD</b> , Medical Standards Committee Chair 4. <b>Brian Mahoney, MD</b> , EMS Council Immediate Past Chair 5. <b>Kevin Sipprell, MD</b> , Ambulance Medical Directors Subcommittee Chair 6. <b>Chief Dale Specken</b> , Operations Committee Chair	1. <b>Marc Conterato, MD</b> , Quality Committee Chair 2. <b>Todd Joing, MD</b> , EMS Council Vice Chair
<b>Guests</b>	<b>Staff</b>
	1. Matthew Maxwell 2. Kristin Mellstrom

1. The meeting was called to order by EMS Council Chair Coyne at 1:06 p.m., with a quorum assembled.
2. The June 12, 2017 Executive Committee meeting summary and today’s agenda were approved by

consent.

**3. Nominations on EMS Council and Committees**

- Amanda Aplin for (vacant) seat as (Alt.) rep for Abbott Northwestern Hospital on the EMS Council
- Jeff Wicklander for (vacant) seat as (Alt.) rep for North Memorial Medical Center on the EMS Council
- Amy Dettman, EMT-P, for (vacant) seat as the non-supervisory ambulance service personnel rep from Ridgeview Ambulance Service on the Ambulance Service Personnel Subcommittee
- Nicole Loomis, EMT\_P, for (vacant) seat as non-supervisory ambulance service personnel from an ambulance service: North Memorial Ambulance Service, on the Ambulance Service Personnel Subcommittee
- Brent Walters, M.D. for (vacant) seat on the Quality Committee as an emergency physician rep from a medical control hospital (Note: Open seat)
- Alex Trembley, for Admin. rep from a Medical Control Hospital on the Quality Committee (Note: Open seat)

**4. Vacancies on EMS Council and committees**

Current vacancies were reviewed. Staff will send a new request for nominations for the vacant seats to EMS Council members.

- Non-supervisory ambulance service personnel from an ambulance service providing unscheduled care within Hennepin County on the Medical Standards Committee (open seat)
- Rep. (Alt.) from Hennepin County Chiefs of Police Assoc. on EMS Council

**5. Work Plan and Committee Reports**

Ambulance Service Personnel Subcommittee Report- Mike Hughes, EMT-P, Chair

The Appendix contains many items that aren't used anymore because medics have online and other tools for many tools. The DNR and POLST forms will be kept in the Appendix but will be revised for clarity and ease of use.

Protocols that were moved to other committees are listed in the AMD or Medical Standards reports below.

Ambulance Medical Directors Subcommittee Report – Kevin Sipprell, MD, Chair

**Protocols – Moved to Medical Standards Committee**

- OB Complications
- Normal Labor and Delivery
- Newborn Emergencies – Revised to reflect current Neonatal Resuscitation Program Guidelines.
- Adult Pain Management – Finalize the protocol that has been in adopted on a trial basis by each service in the past two years which dramatically reduced the administration of opioids except under specific conditions e.g. severe trauma, end of life care
- Adult Ischemic Chest Pain - The most significant change to current protocol decreases use of opioids by directing use of nitroglycerin up to the maximum dose before moving to opioids for pain management when EKG changes are present

**ED Crowding** - chemical dependency and behavioral health patients

- North Memorial Ambulance Service and Allina groups (and others) have workgroups that are looking at existing resources and needs. The AMD Subcommittee plans to draft a position paper on the issue which could be ready for the April 2018 council meeting.

Medical Standards Committee – Michelle London, M.D., Chair

**Protocols-** All protocol changes described in the AMD report, above, were approved by the Medical Standards committee to move to the EMS Council.

**Major Trauma Disposition Guidelines-** The proposed updated protocol, which incorporates the 2011 CDC guideline with elements of the North Memorial Ambulance Service guidelines was sent to all trauma receiving hospitals for comment.

The new CDC guidelines include more types of trauma (mild to moderate) than current disposition guidelines (focus on major trauma), so much of the committee discussion focused on the new guideline's directive to send more patients to the highest level trauma care centers, based on criteria such as patient age if on a blood thinner, and/or presence of minor head trauma. Committee members reviewed feedback from the hospitals, considered the capabilities of metro area hospitals to assess and treat mild to moderate trauma or assess and decided to keep the focus of the EMS Council trauma disposition guideline on major trauma so patient flow isn't significantly disrupted, given that reports of poor outcomes are not being received by Public Health EMS using the current guideline.

The guideline was sent back to AMD Subcommittee for further review and a new revised version that focuses on major trauma.

**STEMI Policy** – The AMD and Medical Standards Committees recognize a need to update the current STEMI Transport policy because it was last approved in 2004 and includes requirements that do not meet current best practice guidelines. This was held over until the next meeting, due to lack of time to fully discuss proposed changes to the current policy.

Operations Committee – Chief Dale Specken, Chair

**Review of Ordinance 9-** The committee could not meet due to a lack of quorum, however, it plans to discuss whether a thorough review of Ordinance 9 is needed, how that could be accomplished, and if a recommendation to go forward with a review should be made to the council.

Quality Committee Report-Marc Conterato, MD, Chair

The committee did not meet last quarter.

6. **Standards for Medical Control Hospitals and Physicians** – Changes were made last year to this standard which included penalties if hospitals were found to be out of compliance with the provisions of the standard. The Executive Committee was granted authority to impose penalties on the hospitals which included the suspension of medical control status and/or suspension of voting status on the EMS Council until the hospital was judged to be compliant by the committee. Upon review of the penalties portion of the standard, it was decided by the committee that the option to suspend a hospital's council voting rights as a penalty for non-compliance may be inappropriate because voting status/membership on the EMS Council is granted by Ordinance 9 under the authority of the County Board. The intention of the penalty for violating this standard is to bring the hospital back into compliance with the standards for medical control so the penalty should suspend medical control rather than membership status on the EMS Council.

The Executive Committee decided to suspend items D-F penalties at this time and move this back to the originating committee (Medical Standards Committee) for revisions.

7. The proposed EMS Council 2018 Work Plan was approved and moved to the EMS Council agenda, which will keep the Emerging Infectious Diseases Plan on the work plan.
8. The proposed EMS Council 2018 meeting calendar was approved and moved to the EMS Council agenda.
9. The proposed agenda for the Oct. 12, 2017 EMS Council meeting was approved and moved to the EMS Council.
10. **Future Meetings in 2017**  
Exec. Committee meetings - Edina Fire Department, Station #1 from 1:00pm-2:30pm on Dec. 11  
  
EMS Council meetings - Hopkins Fire Station from 3:00p-5:00pm on Oct. 12
11. **The meeting adjourned at 2:06 p.m.**

