



MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM

DIVISION OF COMMUNITY HEALTH

MEDICAL ADVISORY BOARD (MAB) MEETING

August 7, 2019 – 11:00 A.M.

MEMBERS PRESENT

Mike Barnum, MD, AMR (Chair)
Jeff Davidson, MD, MWA
Jarrod Johnson, DO, MFR
Brian Anderson, CA (Alt)
Mark Wilton, MWA
Frank Simone, NLVFD (Alt)

David Slattery, MD, LVFR
Jessica Leduc, DO, HFD
Chief Lisa Price, NLVFD
Samuel Scheller, GEMS
Spencer Lewis, MFR (Alt)

MEMBERS ABSENT

Chief Troy Tuke, CCFD
John Fildes, MD, RTAB Representative
Jorge Gonzalez, MCFD
Daniel Rollins, MD, BCFD
Matthew Horbal, MD, MCFD
Chief Shawn Tobler, MFR
Brandon Hunter, AMR

Chief Jon Stevenson II, LVFR
Jim Kindel, BCFD
Scott Scherr, MD, GEMS
Chief Kim Moore, HFD
Mike Holtz, MD, CCFD
K. Alexander Malone, MD, NLVFD
L. Cole Sondrup, MD, CA

SNHD STAFF PRESENT

Christian Young, MD, EMSTS Medical Director
Laura Palmer, EMSTS Supervisor
Gerry Julian, EMSTS Field Representative
Heather Anderson-Fintak, Assoc. General Counsel

John Hammond, EMSTS Manager
Scott Wagner, EMSTS Field Representative
Rae Pettie, Recording Secretary

PUBLIC ATTENDANCE

Larry Johnson
Stephen Johnson
Chris Stachyra
Kim Dokken, RN
Shane Splinter
Jennifer Tucker
Leslie Kosak, RN

Maya Holmes
August Corrales
Sabrina Taylor, MD
Breann Montesanto
Tony Greenway
James Holtz

OTHER ATTENDANCE

David Slattery, MD, LVFR

Jeff Davidson, MD, AR

CALL TO ORDER - NOTICE OF POSTING OF AGENDA

The Medical Advisory Board convened in the Red Rock Trails Conference Room at the Southern Nevada Health District on Wednesday, May 1, 2019. Dr. Mike Barnum called the meeting to order at 11:00 a.m. Dr. Barnum stated the Affidavit of Posting, Mailing of Agenda, and Public Notice of the Meeting Agenda were executed in accordance with the Nevada Open Meeting Law. Dr. Barnum noted that a quorum was present.

I. PUBLIC COMMENT

Public comment is a period devoted to comments by the general public on items listed on the Agenda. All comments are limited to five (5) minutes. Chairman Barnum asked if anyone wished to address the Board pertaining to items listed on the Agenda.

Sabrina Taylor introduced herself as one of the Medical Directors for Dignity Health, St. Rose Dominican. She stated they have eight inpatient beds, as well as eight emergency beds to satisfy the needs of the community. They opened four facilities with the hope of receiving EMS traffic. They have the capabilities to take care of cardiac patients, stroke patients, and low mechanism MVAs. They don't take many mental health holds because of the limited number of available beds. Ms. Taylor stated that they have board certified Emergency Medicine doctors to care for the patients.

Leslie Kosak, CNO for Dignity Health, stated they submitted a request to widen the vital sign parameters for patients coming to their facilities. When asked to send their data in they reported secondary transfers for 2-3 patients for all four facilities. They admitted quite a few of the patients who came by ambulance. Ms. Kosak noted they would like to help assuage the bigger EDs from some of their incoming traffic.

II. CONSENT AGENDA

Dr. Barnum stated the Consent Agenda consisted of matters to be considered by the Medical Advisory Board that can be enacted by one motion. Any item may be discussed separately per Board member request. Any exceptions to the Consent Agenda must be stated prior to approval.

- A. Approve Minutes/Medical Advisory Board Meeting: May 1, 2019
- B. Discussion of Waiting Room Criteria for Referral to DDP
- C. Discussion of Alternate Destination Criteria for Referral to DDP

A motion was made by Dr. Slattery, seconded by Dr. Davidson, and carried unanimously to approve the Consent Agenda.

III. CHIEF HEALTH OFFICE REPORT

No report.

IV. REPORT/DISCUSSION/ACTION

- A. Discussion of AB 317 Analysis

Mr. Hammond reported the Health District has been in communication with the state to discuss shifting some of the responsibilities related to trauma center designation. A rubric was developed, based on the enrollment of the bill, to assist Dr. Iser with the process. In response to a question about the timeline, Mr. Hammond stated that judging from history it may be anywhere from a year to two years for trauma regulations to be developed at the state level. Mr. Hammond stated the Health District writes their own regulations, but the NAC's are written by the Legislative Counsel Bureau, which may take a little longer. However, it may be quicker because of a sense of urgency, and the political ramifications involved. Mr. Hammond stated that upon completion, we will mirror their regulations.

B. Committee Report: Drug/Device/Protocol Committee (6/5/19 & 8/7/19)

1. Discussion of Nominations for PharmD Ex Officio Member

Dr. Shannon Ruiz was voted in as the PharmD member.

2. Discussion of Development of a Sepsis Protocol

A Sepsis Protocol will be developed for discussion at the next DDP.

3. Discussion of Stroke Protocol and Possible Receiving Facility Designation Criteria

The DDP recommended reconvening the Stroke Task Force for further discussion.

4. Discussion of Review/Discuss Quick-Trach Device - Tabled

5. Discussion of Capnography Criteria on Termination of Resuscitation Protocol

Dr. Barnum stated the DDP made a motion to revise the Termination of Resuscitation Protocol to read as follows:

“For medical arrest:

The patient remains in persistent asystole or agonal rhythm after twenty (20) minutes of appropriate Paramedic resuscitation, to include:

- 1) CPR
- 2) Effective ventilation with 100% oxygenation, with continuous capnography
- 3) Administration of appropriate ACLS medications”

A motion was made by Dr. Leduc to approve the revisions to the Termination of Resuscitation Protocol. The motion was seconded by Dr. Davidson and passed unanimously.

C. OEMSTS 2nd Quarter 2019 Reports

Transfer of Care (TOC) Report

Gerry Julian reported the 2nd quarter TOC compliance was at 75.5%, which met the 35-minute standard, with no major outliers.

Transfer of Care Compliance by Facility, Clark County NV

	Total TOC	Noncompliant TOC	Compliant TOC	Compliance Rate (%)
Total	48,407	11,970	36,437	75.3

Transfer of Care Time Completion by Facility, Clark County NV

	Total TOC	TOC not Completed by ED	TOC Completed by ED	Completion Rate (%)
Total	48,407	30,037	18,370	37.9

Transfer of care Time Outlier Report by Facility, Clark County, NV

	Total TOC	TOC	< 0 min	0-1 mins	1-2 mins	2-3 mins	3-4 mins	4-5 mins	≥ 5 hrs
Total	53,141	4,734	0	475	870	1,191	1,062	1,136	0

Internal Disaster 2nd Quarter 2019 Report

	April	May	June
2018	2.56	.51	.64
2019	1.90	1.18	1.06

Mr. Julian noted there was a significant drop in daily average of hours for Internal Disaster across the board.

Mental Health Holds 1st Quarter 2019 Report

	Total L2Ks 2019/2018	Inpatient 2019/2018	Emergency Dept. 2019/2018	Awaiting SNAMHS 2019/2018
April	242/261	113/115	129/147	113/162
May	206/268	98/116	109/153	95/159
June	215/277	101/135	113/142	101/157

V. INFORMATIONAL ITEMS/ DISCUSSION ONLY

A. ED/EMS Regional Leadership Committee Update

No report.

B. QI Directors Committee Update

Dr. Young reported the committee is reviewing specific cases to discuss the Termination of Resuscitation protocol with regards to: 1) When it's being used; 2) How it's being used; and 3) When it's not being used.

Dr. Young stated there was a pediatric resuscitation case presentation from MW and UMC. He noted that the QI Directors Committee continues to challenge our local protocols and to continually look for improvement.

The committee has also started to collect data related to stroke and STEMI metrics for the purpose of tracking and trending. They also will continue to look at outcome measures.

C. Emerging Trends

Mr. Hammond stated that the 'Emergency Trends' agenda item will be placed on all future agendas. It is for individuals to bring up current issues for discussion. Dr. Young stated a similar agenda item is regularly on the County Commissioners' agenda so the representatives can bring up issues from their specific ward.

Dr. Slattery related that the Crisis Response Team (CRT) has a full ALS unit that includes a licensed clinical social worker. They respond to 25 Alpha and Bravo calls, such as psychiatric emergencies. The purpose of the unit is to both screen the patient for medical mimics and medical issues that require a mental health patient to be brought to an emergency department. The social worker will assess the patient to evaluate whether they should be placed on a mental health hold. Dr. Slattery noted that for the time period May through December 2018 there were 1,333 calls; 292 patients, or 22%, were able to be taken directly to a mental health facility. They avoided placing approximately 85% of those patients on a mental health hold in the ED. From January through June 2019 there were 1,325 calls; 320 patients, or 23%, were taken directly to a mental health facility. He noted it's the right thing for that subset of patients. He thanked AMR, Southern Nevada CHIPs, and the entire CRT team for the time and effort they have contributed to the project. He is hopeful that other mental health facilities will come on board in the future.

Dr. Davidson noted the Hepatitis A outbreak has affected the four inner-city facilities. The Health District has been doing a great job in providing vaccinations. Ms. Palmer stated the Health District is setting up an MCI structure internally to handle the issue. Paramedics and AEMTs may dispense immunizations. There is an application process through the OEMSTS, and there is no charge. The individual agency just needs to provide the training.

Dr. Davidson asked if there was an update on the West Nile Virus. Mr. Hammond stated the newest case was reported earlier that day. The Epidemiology Department warns to watch for standing water, keep areas clean around the house, and to use bug repellent when outdoors.

VI. PUBLIC COMMENT

Public comment is a period devoted to comments by the general public, if any, and discussions of those comments, about matters relevant to the Committee's jurisdiction will be held. No action may be taken upon a matter raised under this item of this agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken pursuant to NRS 241.020. All comments are limited to five (5) minutes. Dr. Barnum asked if anyone wished to address the Board. Seeing no one, Dr. Barnum closed the Public Comment portion of the meeting.

Dr. Kilburn, Deputy Chief of Staff for the 99th Medical Group at Nellis AFB, introduced Dr. Anthon Lemon, an active duty MD, as their new EMS Medical Director. Dr. Lemon was with the 99th Med Group for quite a while, worked in Japan for a year, and now he's going to be helping to lead the effort to become a Level III trauma center and to receive non-trauma civilian ambulances by this Fall, or early Winter. He is hopeful Dr. Lemon will be interfacing with a lot of the Board and sub-committee members and form some very successful partnerships.

VII. ADJOURNMENT

There being no further business, the meeting was adjourned at 11:24 a.m.