



Meeting Title:	Emergency Medical Ser	rvices Advisory Council (EMSAC)
Meeting Location:	Zoom Meeting	
Meeting Date:	January 21, 2022	
Time:	2:00 p.m.	
Attendees:	Council Members: 1. Dr. Rick Carlton, Chair 2. Dr. Jonathan Wilson 3. Dr. Kendall McKenzie 4. Dr. Hugh Gamble 5. Dr. Claude Brunson 6. Dr. Duncan Donald 7. Dr. Jeremy Rogers 8. Dr. Mike Cole 9. Dr. Clyde Deschamp 10. Mr. Mark Davis 11. Mr. Jeff Welborn 12. Mr. Eric Valles 13. Mr. Dennis Hebner 14. Ms. Suzanne Joslin 15. Mr. David Grayson 16. Mr. Mark Galtelli 17. Mr. Andy Woodard 18. Mr. Tyler Blalock MSDH Staff: Dr. Bob Galli – State Medical Director Ms. Christy Berry – OEPR Director Mr. David Hall - EMS/ACS Director Mr. Steven Jones – BEMS Ms. Billie Collier – BEMS Ms. Kay Chambers – BEMS Ms. Elaine Coleman – BEMS Ms. Teletha Johnson – ACS Ms. Teresa Windham – ACS Ms. Alisa Williams – COVID Unit Director	Guests: Dr. Damon Darsey – Wayne General Amb Svc, PatientCare EMS, St Dominic DPS Dr. Harper Stone – MS Healthcare Alliance Ms. Dee Howard – MS Healthcare Alliance Mr. Ryan Wilson – AMR Central Dr. Benji Sessums – EMS Educators Mr. Chuck Carter – AAA Ambulance Mr. Sam Marshall – PHI Air Medical Ms. Julia Clark – Ms Ambulance Alliance Mr. Will Appleby – UMMC AirCare Ms. Wyth Collins – EMServ Ambulance Ms. Linda Cox – Yalobusha Cnty Amb Svc Ms. Samantha Watts – Southaven Fire EMS Mr. Stephen Houck – UMMC Med Comm Mr. Michael Arinder - AMR Mr. David Eldridge – MedStat EMS/LifeGuard Mr. Eric Sprayberry – MedStat EMS Mr. Freddie Parker – Pafford EMS, Inc Mr. Scott Stinson – AAA Ambulance Ms. Sarah McFadden – EMServ Ambulance Mr. Zac Case – MedStat/LifeGuard EMS Ms. Amanda Fontaine Ms. Bella Winslow







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	AGENDA TOPIC	NOTES
I	Call to Order	 Dr. Carlton called the meeting to order at 2:00 p.m. Dr. Carlton recognized Ms. Christy Craft Berry, Director of the MSDH Office of Emergency Planning and Response Ms. Berry introduced Mr. David Hall, the newly appointed Director of the Bureau of EMS
II	Roll Call	• Mr. Hall called roll and welcomed newly appointed members, re-appointed members, and existing members
III	Old Business	 a. Review Minutes of Previous Meeting Jan 2020 Meeting Dr. Wilson, Motion to Accept Dr. Donald, Second Unanimous approval b. Bureau of EMS Report MSDH/BEMS Report – Mr. provided the report; shared his goals moving forward; focus on customer service; desire to work with stakeholders to mitigate some of the obstacles EMS faces, including: COVID 19, Interfacility Transfers, Wall Times (see discussion below), Staffing, Education, NREMT/State pass rates, Accessibility, Legislative efforts, and non-transport EMS; shared his hope that those of us who makeup EMS in MS might stick together, work together and together mitigate the impact of these various issues; related the importance of good communication between parties in EMS
		 ii. <u>EMS Operational and Professional Services</u> - Mr. Jones shared BEMS plans to resume counter service for the current recertification period; online remains the desired option for recertification; shared current state certification statistics: EMT – 1938, AEMT – 88, NRP – 1765, and CCP – 34, as of January 2022; stated that the bureau would like a meeting with the EMS educators to see what we could do to help with state pass rates for all levels; Dr. Carlton asked to see NREMT statistics; Mr. Tyler Blalock asked if we could possibly run a report for the average age of the workforce; Mark Galtelli asked if we could get an average on NREMT and state certifications from last several years to see if we

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		 are increasing or decreasing; Dr. Hugh Gamble would like to see a number that is needed from each service to completely fill a schedule and how many they currently have on staff of each level; Mr. Hall advised BEMS would work to provide the requested data; Dr. Mike Cole asked if we could add call volume for years 2018-2021; Dr. Clyde Deschamp stated that the fact that there are just as many EMTs and Paramedics is disturbing, and we need to possibly rerun that report; Mr. Blaylock agreed; Dr. Cole also added we needed an Adhoc group to investigate the reason why people are leaving the field; Mr. Dennis Hebner advised he would be glad to serve on that committee iii. EMS-C - Ms. Billie Collier provided and update on the EMS for Children program; states everything with the grant was on track; relatedly, as of 08/31/21 82/83 hospitals has completed their readiness assessments; EMS readiness assessments went out on 01/05/22, anticipated completion March 2022 (33% complete at present); EMSOF Grant application review continues c. Committee and Subcommittee Reports i. <u>MDTQA</u> - Dr. Robert Galli provided the report; MDTQA has been working through the pandemic to help services with staffing issues and talks are in the works for a tiered system approach in some areas ii. <u>MTAC</u> - Dr. W. Duncan Donald provided the report; MTAC met last week; working to gather information on transfers from ED to ED and how to get patients transferred quicker and mitigate delays; trauma center data needs to provide for benchmarking options; need to reevaluate on how the trauma symposium scheduled for May 4-6 at the Riley Center, Meridian, MS
		iii. <u>Rules and Regulations</u> – Dr. Jonathan Wilson

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		 advised there was nothing to report from rules and regulation committee iv. <u>MHCA</u> – Ms. Dee Howard provided the report; advised the healthcare alliance spends a lot of funding on radio and television ads to recruit EMTs and Paramedics in MS; ads going on now with Dr. Deschamp and Ryan Wilson as the personalities in the ads; both have done radio talk shows; they are also working on a campaign to show the importance of calling 911 for heart attacks and strokes; Dr. Harper Stone made a comment on the importance of pre-hospital 12-Lead EKG and hospital destination selection; STEMI and stroke committees are looking for ways to pinpoint hospitals and agencies that need help in addressing issues with timely acute care and transport; advised that all entries into the cardiac arrest system need to be entered by January 31, 2022 for year 2021; MHCA annual symposium will be held at the Jackson Hilton on February 25th (registration is online at the MHCA website); advised ASLS Provider Course on February 24th at UMMC training center but to attend you must attend symposium; Dr. Carlton asked about the number of EKGs and transporting; Dr. Stone stated that the PCI should be less than 90 minutes; actual time in Mississippi has gone up; recommended looking into why these numbers are going up; once EMS arrives on scene the EKG should be done within 10 minutes per Dr. Stone; Mr. Mark Galtelli shared the new EMT and AEMT scope of practice once approved would provide for these levels to obtain and transmit EKG
IV	New Business	 A. Dialogue on telehealth use in acute pre-hospital care – Mr. Hall raised the question of whether a dialogue on the use of telehealth in the EMS/acute care setting might be useful;

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		 Dr. Donald advised that many of the patients were being discharged from higher-level receiving facilities very soon after transfer from lower-level centers; patients may benefit from telehealth and a referral process; Dr. Carlton states that the technology exists but is not being utilized; Dr. Galli states that all parties must understand that they can make the call and the physician has to be ready to answer the call in a telehealth network; Dr. Stone stated that if you were the doctor on call you should have all information in your hands with today's technology B. Wall times – Dr. Carlton brought up the issue of "wall times" and shared wall times appear to have worsened with COVID-19; he proposed various entities concern themselves with this issue; he proposed the issue has implications for nursing and nurses are leaving the profession; Mr. Cole states the focus should be on EMS, to aim to solve the problem with EMS holding the wall and offering free labor to hospital; Dr. Carlton agreed it is a hospital issue and it is critical since services are having to hire extra people at both the services and hospitals; Dr. Stone asked who is responsible for the patient when they are on the wall; Dr. Carlton advised that if the patient is 250 yards from the ER the patient comfort and outcomes; Dr. Galli asked why ERs expect ambulance staff to care for the patients; Mr. Mark Davis brought up that at some hospitals in the north part of the state will have rooms but not enough nurses to care for them; in these situations EMS is holding the wall due to low staffing and not low bed count; Dr. Gamble states hospitals have dumped the problem on EMS and proposed a lawavit; Dr. Deschamp shared the Central EMS District has proposed a policy to allow for EMS crews to leave the patient in a timely manner; states that if the service is low on trucks, the highest-level personnel will call, and if there are no units available for the county, that truck will advise the charge nurse and find a place for the patient; D



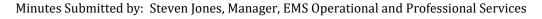


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V	Announcements	 Blalock advised this has been a issue since 2018 with the hospitals taking advantage of free EMS labor; as the EMS crew is tending to the patient the hospital is billing for all services that they are doing while the patient is on the stretcher; Mr. Hall read the proposed rules which were previously tabled pending an economic study; Mr. Hall asked stakeholders to be on the lookout for the imminent economic impact study survey to be emailed to stakeholders; Dr. Galli states hospitals have not owned up to the problem and this has become the standard of care; he asked why we could not put 8-9 no critical patients in a room and have them monitored by 1 person with basic test and treatment being done while waiting on a room; Mr. Galtelli states all parties need to be involved, meet and work through the issue; Ms. Howard spoke from the audience and called on Dr. Dobbs to get involved and call together representatives from the hospitals and EMS; Dr. Carlton states we need to reach out to the nursing schools to make it more desirable to get more nurses in the system due to this reaching a critical mass issue; Dr. Wilson made a motion we need to ask the state health officer to get all parties together to work towards a solution; second by Mr. Blaylock; passed unanimously Dr. Deschamp shared that there are no dialysis services available at Delta hospitals on the weekends; Dr. Galli advised that EMS should take the patient to the best facility, and they should know what hospitals the staff and capability on the weekends; Dr.
		Next Meeting: April 15, 2022 at 2pm via ZOOM unless something changes with MSDH policy
VI	Adjourn (to Executive Session if needed)	Dr. Carlton adjourned meeting at 4:00pm.





ACTION ITEMS			
#	Step	Person (s) Responsible	Due Date
	Report on # NREMT & MS certified providers,	Mr. Steven Jones	EMSAC APR 15, 2022
Ι	all levels, $2018 - 2021$, and staffing demand	Mr. David Hall	
п	Bring groups together on wall times with state health officer.	Mr. David Hall	ASAP



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Revised 1/22/18





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Form 1075





Instructions for Form 1075, Meeting Notes

Revision Date, 1/22/18

Purpose: The MSDH Meeting Minutes is optional and not mandated for use; however, it is strongly recommended to meet adequate documentation standards as a PHAB accredited agency. The form serves as strong documentation that a meeting took place and what was discussed. This documentation is very important for continuing accreditation.

Instructions: Prior to the meeting, prepare the agenda with topics to be discussed and times for discussion. Meeting Title, Location, Date and Time should match what is listed on the Meeting Agenda (Form 1074). Agenda topics should also be listed in the table provided, and corresponding discussion and/or decisions made should be entered into the notes section of the table. The Action Items table should be completed to list actions to be taken after the meeting, as well as who is responsible for their completion and any relevant deadlines associated. There is space in the footer for the name of the person who compiled the minutes and submitted them to the group for review and approval.

Office Mechanics and Filing: To be determined by meeting purpose and topics discussed.

Retention Period: To be determined by meeting purpose and topics discussed.