

May 31, 2011

Meeting called to order at 1935 hours (due to a quorum not available until then) by V/Chair Katzman

Members Present: Grover Katzman, Dick McDougall, Carol Muench, Gary Jarvis, Ken Gardner,

Curt Newtown and Kevin Wells

Excused: Phyllis McDougall and Jean McLear Guests present: Craig Balland and Ann Smith

The minutes of the March meeting were not reviewed as no member received the minutes

Correspondence:

A Bio date sheet was received from AJ Barr indicating an interest in membership on this board application tabled at this time per V/Chair Katzman

Office of Emergency Services: (Craig Ballard)

March EMS calls -635 Fire calls -210 April EMS calls -583 Fire calls -196

Craig reminded the EMS units that the UHF freq. is an alternative when the primary VHF frequencies are busy

Craig also wants to make EMS units aware that APCO-AFC announces special pricing for narrow-banding re-licensing as an alternative to applying to the FCC (SEE ATTACHMENT)

NCPA/REMAC/REMSCO:

Ann Smith reviewed her submitted report (SEE ATTACHMENTS)

Unfinished Business:

Per Gary Jarvis, the Board of Legislators did appoint Dr. Healy to this Board, although we have not received his appointment letter. Carol Muench will check with Dr. Healy at CPH. The Board has heard nothing on the appointment of Tom Tomlins as of this date.

Concerns From the Floor/Comments:

Ken Gardner spoke regarding being notified by Seaway Valley that they would have a rig available in the City of Ogdensburg (for Mutual Aid only) while awaiting for a patient to finish dialysis (three days a week)

Ken also made comments on a meeting he attended at TIERS in Clayton recently and the proposal to form a North Country District of the New York State Vol. Ambulance and Rescue Association (NYSVARA).

Dick McDougall requested the support of this Board to support NYS Senator Patty Ritchie and her effort to have "Marks Law" passed. This info will be passed to the Board of Legislators for their approval and resolution.

Dick also commented on the excessive number of hours of ambulance ride time and hospital time required by the ALS classes. Due to employment, family commitments, and our rural setting, certain types of required areas (trauma/Peds/OB) are hard to come by even if a pupil sits for hours at a high volume organization. Any parent would know that babies are never born on a set schedule.

Next Meeting will be Sept 27, 2011 @ 1900 hours Meeting adjourned at 2010 hours



North Country EMS Program Agency

"Serving Jefferson, Lewis & St. Lawrence Counties"

Ann M. Smith, EMT-CC, Director Mysti L. Mattice, Secretary

St. Lawrence County EMS Advisory Board Meeting May 31st, 2011
Regional Meetings April 4th, 2011

Spring Fling April 28-30

Very Successful, will be held at Edgewood Resort and conference center next year. Mark your calendar for April 26th-28th

Air Medical- Met on April 14th- St. Lawrence had 12% of all calls to clearing house between January and March 2011. Discussed North Country Helicopter landing zone book and it was asked if anyone had revisited the sites to ensure they were still suitable. We have not but I thought it may a good idea and I plan on working with County Coordinators to discuss whether or not it is needed.

Regional Intubation Forms are back and must be completed by ALS whenever a patient is intubated. Form can be found on our website www.canton.edu/ncems under the forms section.

Gouverneur Rescue was approved for transport ventilator and monitoring of propofol for interfacility transports only done only by paramedics with the additional training.

Seaway Valley was approved to monitor patients receiving Vecuronium during interfacility transports only by Paramedics with special training.

NAEMT has completed a safety course for providers and we are looking to be one of the train the trainer sites.

North Country EMS received 100.00 gift card to staples for being one of the first five regions to achieve 100% return on the Pediatric Survey that the state put out the end of last year. We will be awarding this to one of the agencies who received the survey and completed it for this round of surveys.

The drawing will be held at next REMSCO Meeting

State EMS Meetings are May 24th and 25th

- NYS will be looking into compliance with Capnography use during the months of July and August.
- Have accepted the NYS National Curriculum, changes to come but not complete yet...Continuing to teach and test the current curriculum.
- CLI class changed to teach the way we play- old curriculum, no prescreen required.

- Vital Signs in Syracuse October 13th-16th
- NYS Council Award nominations will be due by March next year so we need to plan
 appropriately. This is because all state nominations will be forwarded for National recognition
 and there deadline is June 1st.

Electronic Documentation -The following St. Lawrence agencies are currently submitting PCR's electronically: Ogdensburg Rescue, Potsdam Rescue, Hermon Fire Department, Colton Fire Department, RB Lawrence Ambulance

Excellence in EMS Awards – Attended Waddington's banquet and handed out an excellence in EMS award from September 2010.

NYS EMS Council Awards were forwarded to the state- 2 for St. Lawrence County Brendon Murphy – Commissioners Award Dr. Craig Todd- Physician of Excellence

Protocols- Working with 4 other neighboring regions to develop protocols that are the same. This is a huge process but seems to be moving forward.

STILL WORKING

Trainings-

March 24th – 12-lead Acquisition SUNY Canton CC class April 2nd – Albuterol Administration to SUNY Canton BLS class Spring Fling!

Upcoming-

I will be doing a **Daytime EMT Original/Refresher** at the Lisbon Fire Station starting the end of August. Must have 12 original students to do the course please help spread the work, application should be out soon

CHMC-Construction and ambulance entrance change to old entrance. Will have to back out, recommend using spotter for safety, mirror to be placed.

Will need Key Fob to enter, working with CHMC to see who has them, if they are working and who needs them.

Accreditations

All NAEMT continuing education courses are accredited by the Continuing Education Coordinating Board for Emergency Medical Services (CECBEMS).

They also are recognized for recertification requirements by the National Registry of Emergency Medical Technicians (NREMT).

Thd or orduct a course

EMS Safety courses are conducted nationwide.

If you are a student interested in taking this course, please visit the Education section of www.naemt.org to use our course locator to find a course in your area.

If you are a course site, to learn more about conducting an EMS Safety course, please call 1-800-346-2368.



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NAEMT is the nation's only professional association representing all EMS practitioners, including parametics, emergency medical technicians, first responders and other professionals working in prehospital emergency medicine.

Through its industry-leading EMS continuing education

Through its industry-leading EMS continuing education courses, NAEMT annually helps more than 46,000 EMS practitioners provide better care and save more lives.

Helping save lives one course at a time www.naemt.org
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TWING STETY to the Streets



TROPING YOU SUIT

Emergency medical services is a dangerous job. Safety issues can occur while lifting a patient, driving an ambulance, providing treatment on the roadside or in the back of an ambulance, dealing with agitated patients or bystanders—or even as EMS practitioners try to properly care for themselves while experiencing regular on-the-job stress and disruptive schedules.

As a workforce that suffers from high injury and disability rates, EMS practitioners experience a continuous and real challenge: keeping themselves, their colleagues, patients and bystanders safe.

To help promote a culture of EMS safety and to help reduce the number and intensity of injuries incurred by EMS practitioners in carrying out their work, the National Association of Emergency Medical Technicians (NAEMT) has introduced the EMS Safety course. EMS Safety aims to increase students' awareness and understanding of EMS safety standards and practices and develop their ability to effectively implement them.

EMS Safety is the first national and most comprehensive education program of its kind that teaches techniques on how to best achieve safety on the job.



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EMS Safety covers safety in emergency vehicles, at the operational scene and while handling patients, as well as patient, practitioner and bystander safety and personal health.

The course offers an overview of current issues surrounding safety in EMS, presents and discusses case studies, builds risk assessment and decision-making skills and provides an opportunity for participants to relate their own experiences with EMS safety issues.

EMS Safety is for all EMS practitioners, other medical professionals providing prehospital patient care, EMS supervisors and administrators concerned with safety.

Students who take EMS Safety will learn to:

- Identify key elements in the safe operation of an ambulance.
- Describe techniques for moving and securing patients safely.
- Recognize situations where the EMS practitioner may be at risk of violence, and how such situations may be either avoided or addressed.
- Appreciate the importance of maintaining good personal health, and the impact of EMS service on practitioners' personal health.
- Address safety elements in a variety of operational situations.

The EMS Safety curriculum

The course charges students to become leaders in creating a culture of safety within EMS and identifies steps they can take to be a part of the process. The curriculum covers the following:

- Emergency vehicle safety Reviews principles of defensive driving, ambulance design dangers, use of warning lights and sirens, common driving distractions, risk mitigation techniques, and the importance of securing patients, equipment and personnel.
- Responsibilities in scene operations Addresses roadside safety, warning device use, apparatus, lighting, and high-visibility clothing, and interagency planning and cooperation, giving students the opportunity to describe how they would protect the scene in a series of simulated incidents.
- Patient handling Covers body mechanics and safe moving of patients using proper lifting techniques and mechanical and other transfer aids, strategies to avoid common back injuries, the "EGGS" methodology, proper evaluation, planning and preparation for patients and the environment, and equipment selection and use.
- Patient, practitioner and bystander safety Discusses crime scenes and dangerous facilities, commonly improvised weapons, handling of weapons found at the scene, techniques of verbal de-escalation and self defense, chemical and physical restraints, and incidents of violence.
- Personal health Outlines the importance of personal health in preventing accidents and injuries, stresses unique to EMS, caring for mental health, techniques to ensure sleep despite demanding or erratic schedules, and the importance of fitness, exercise, and proper nutrition and hydration.

APCO-AFC Announces Special Pricing for Narrowbanding

APCO-AFC IS OFFERING SPECIAL PRICING TO MODIFY YOUR PART 90 PUBLIC SAFETY LICENSE TO ADD NARROWBAND EMISSION, IN THE SAME CONFIGURATION AS CURRENTLY LICENSED, AT \$25 PER CALL SIGN*.

THE TIME TO PLAN IS NOW!

THE FCC WILL TERMINATE YOUR LICENSE IF YOUR AGENCY IS NOT IN COMPLIANCE WITH NARROWBANDING. THE FINAL DEADLINE IS JANUARY 1, 2013 TO CONVERT TO NARROWBAND OPERATIONS.

* APPLICATION MUST BE SUBMITTED USING <u>WWW.SPECTRUMWATCH.COM</u>. IF ANY OTHER MODIFICATIONS ARE REQUESTED, ADDITIONAL FEES MAY APPLY.



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