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**MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES**  
**State Advisory Council on Emergency Medical Services**

**MEETING SUMMARY**  
**CONFIDENTIAL PEER REVIEW**  
**MEETING DATE: October 27, 2020**

<https://global.gotomeeting.com/join/897177493>

One-touch: <tel:+18722403212,897177493>

1 (872) 240-3212 Access Code: 897-177-493

Many thanks to Cox Health and Mark Alexander for arranging our virtual meeting today

Dr. Lynthia Andrews presiding. A quorum was present.

**APPOINTED BOARD MEMBERS:** Mark Alexander, Dr. Lynthia Andrews, Ben Chlapek, Dave Herman, Eric Latimer, Ruby Mehrer, Wally Patrick, Helen Sandkuhl, Sam Schneider, Dr. David K. Tan.

**BOARD MEMBERS PRESENT:** Dr. Lynthia Andrews, Chair; Mark Alexander; Ben Chlapek, Ruby Mehrer; Wally Patrick; Helen Sandkuhl, Dr. David Tan

**ABSENT:** Dave Herman, Eric Latimer, Sam Schneider.

**ATTENDEES:** Erin Benning, SSM Health; Dr. Sabina Braithwaite, Wash U & MO State EMS Medical Director; Dr. Matt Brandt, Cox Health, Springfield; Dr. Christie Brock, Centerpoint (HCA) Independence; Marc Carr, Boone Hosp EMS; Patricia Casey, Cardinal Glennon; Carrie Chismarich, SSM DePaul; Mallory Clatterbuck, MU Health-TPM; Susan Crum, Cox Air Care Chuck Doss, Boone Co Fire; Christy Dressler, CMH-KC; Joshua Dugal, Cardinal Glennon; Maura Gray, AHA; Dr. David Gustafson, Multiple EMS Med. Director; Kristen Jones, CARES-Wash U; Liz Kendrick, EMSC-MU Health; Dr. Melissa Kroll, Wash U; Mike Latta, KCFD; Danielle Lee, Randolph County Amb. Service; Debbie Leoni, SE Health; Dr. Tom Lewis, Mercy SL; Bud Mantle, Mercy-SL; Chris Mattes, Mercy-Spfld; Art Maxwell, NTA Ambulance; Tracy McDonald, HCA Midwest; Tom Modin, St. Luke's KC; Bob Patterson, Mercy-Spfld; Kat Probst, Adair Co AD; Kelly Riedel, SSM Health; Heather Scruton, CMH-KC; David Seastrom, CMH-KC; Dr. Jeffery Siegler, Wash U; Jim Usry, Pattonville FPD

*Note: If you attended but are not reflected on the attendees list, please email [ruby@lifeflighteagle.org](mailto:ruby@lifeflighteagle.org) for correction.*

**DHSS Staff:** Sam Vance, BEMS Chief, Theresa Bates; Katherine Crockett; George Miller

The meeting was called to order at approximately 12:40 pm.

Topic	Discussion/Conclusion	Recommendation/Actions	Follow-up
<b>I. Review of Minutes</b>			
<b>A. Approval of Minutes Sept. 22, 2020</b>	<p>Ruby Mehrer said she needs to correct typos on pages 6 and 7 to read August instead of Sept. And on page 10 to delete 'next meeting Sept 14'.</p> <p><b>Wally Patrick moved to approve the Sept. 22, 2020 meeting minutes with those corrections. Second by Ben Chlapek. Motion carried.</b></p>	<p>Approved minutes will be posted on the BEMS website.</p>	
<b>II. Subcommittee Reports</b>			
<b>Pediatrics Subcommittee Patricia Casey, Chair</b>	<p>Patricia Casey said the pediatric subcommittee met this morning.</p> <ul style="list-style-type: none"> <li>• EMSC gave a report on recent activities.</li> <li>• The subcommittee is working with Jason White for DNR legislation to include pediatric patients in certain circumstances. Hospitals in general have been supportive. Other groups will be consulted in an effort to gain support to address DNR orders for pediatric patients.</li> <li>• Child Preventable Trauma Education available Nov 18. Contact Trish for details.</li> <li>• Discussion included reasons for gunshot wounds (GSW) to have increased over the past several months. With schools closed or operating at less than capacity, more children spend time unsupervised which may be a factor in some of the GSW. Crossfire was another factor.</li> <li>• Children hit by cars is also up 50%.</li> </ul>		
<b>B. Trauma Subcommittee Dr. Christie Brock, Chair</b>	<p>Notes from Dr. Brock: 10/27/2020 10AM Missouri Subcommittee on Trauma</p>	<p><u>From Sept 22, 2020 minutes:</u> Jami Blackwell to forward the trauma regulations to Ruby</p>	<p><u>Entry 10-27-2020</u> Not received for distribution yet.</p>

	<p>Dr Brock, Chair Pam Jackson, Meeting coordinator</p> <p>The MO COT (Committee on Trauma) has reviewed the regulations. They continue to be in support of regulations as close to ACS (American College of Surgeons) as possible and otherwise have no recommended changes at this time. The regulations have been forwarded to Sarah Willson at MHA (Missouri Hospital Association) for further review. The COT did indicate that they would support the state moving to ACS accreditation but acknowledge that that makes Level 4 verification difficult. The subcommittee will begin reviewing the previous Level 4 verification documents (last reviewed in 2011). Those were sent to the committee today and we plan to discuss again in January. The COT also indicated an interest in replacing the 15-mile rule with a population-based assessment or a needs assessment. We can continue further discussions on that as well.</p> <p>Nicole Gamm provided an update from the state. The TCD waiver is still in place until 12/30 and no surveys are planned until that time. They are considering restarting after January 1<sup>st</sup>, depending on the state of the pandemic. Arlinda's position in the department had been frozen but they are now actively recruiting, and Nicole hopes to have a replacement by January. They are in discussions about possibly moving to virtual, especially in light of many hospitals requiring surveyors to be COVID tested prior to arrival. A new deputy director has just started. Mr. Steve Bollin replaces Dean Linneman. Of course, we must all wait and see what will happen with the election next week.</p> <p>Education updates:</p> <ol style="list-style-type: none"> <li>1. Midwest Trauma Society is sponsoring a Trauma</li> </ol>	<p><i>Mehrer for distribution to the SAC list. As further steps are taken towards completion, Jami will send Ruby updates to distribute to the SAC email list.</i></p>	
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	<p>program leadership conference on 1/28. It is free, virtual, and open to anyone involved in Trauma Leadership or registry. Dr. Fakhry and Dr. Marks are slotted to speak. Nursing CE's will be provided. Tracy McDonald will be sending out a save the date soon.</p> <p>2. TQIP (Trauma Quality Improvement Program) conference is also free and virtual this year. The presentations will be available for 60 days after the conference.</p> <p>TQIP firearms study: Many in the state are hoping to participate but are unsure how to gather data. Data collection begins on or about February 2021. The group will forward thoughts and ideas and we will discuss at our next meeting.</p> <p>Interest remains in the injury rate following the helmet law change. The committee will plan to query the MO database in the spring to allow at least 6 months after the regulation change.</p>		
<p><b>C. Legislative Subcommittee</b> <b>Mark Alexander</b></p>	<p>Mark Alexander reporting:</p> <ul style="list-style-type: none"> <li>• National and local elections are pending.</li> <li>• Next year TCD legislation—state may start up state TCD committee meeting again.</li> <li>• Sales Tax, Tax ½ to 1 cent increase passed in 2020 but the governor vetoed it as part of a bill that he caused him concerns—not related to the sales tax increase. Likely the issue will be part of the 2021 legislative efforts.</li> <li>• AED law that passed had requirement of reporting the location to the local PSAP taken out. There is a group working on how to best address this issue.</li> <li>• TIF language being defined.</li> <li>• Lagers issue passed, allowing EMS to retire at 55,</li> </ul>		

	<p>similar to other first response professionals. Applies only to those in and ambulance district at this point.</p> <ul style="list-style-type: none"> <li>• Paramedic to PA (Paramedic Advanced) has a group working on this issue.</li> <li>• Overdose issues may be explored.</li> <li>• FRA will need to be renewed</li> <li>• Medical Helicopters issues may have issues to address</li> <li>• There is some movement to require a CPA to audit ambulance districts.</li> <li>• DEA changes will include allowing the ambulance service to have its own controlled substance license. To this point, the EMS agencies had to use the medical director's license.</li> </ul>		
<p><b>D. Education Subcommittee</b> <b>Chuck Doss, Chair</b></p>	<p>Chuck Doss reported the Education Subcommittee did not meet in October. However, discussion continues on .331 – regulation on training entities.</p>	<p>For info contact Chuck Doss <a href="mailto:cdoss@bcfdmo.com">cdoss@bcfdmo.com</a> Educ. Subcommittee meets 3<sup>rd</sup> Wednesdays at noon by conf call. Agendas and call info posted on <a href="https://health.mo.gov/safety/em/s/">https://health.mo.gov/safety/em/s/</a></p>	
<p><b>E. Air Ambulance Subcommittee</b> <b>Ruby Mehrer, Chair</b></p>	<p>Ruby Mehrer reported the Air Ambulance Subcommittee met this morning. Discussion centered around COVID challenges and responses.</p>		
<p><b>F. Emergency Management</b> <b>Helen Sandkuhl, Chair</b></p>	<p>Helen Sandkuhl reporting:</p> <ul style="list-style-type: none"> <li>• Efforts are underway to try to reduce the spread of COVID.</li> <li>• COVID spikes in communities and how to resolve has been a focus. Protection for EMS needs to be considered.</li> <li>• DMAT is helping in nursing homes, staffing etc. Helen intends to explore having EMTs help in those roles as well. She will talk to Commander Tweedy.</li> <li>• Dr. Andrews said we need to be ready to get and give</li> </ul>		

	<p>vaccinations. Need to determine who is priority for the first round of COVID vaccine.</p> <ul style="list-style-type: none"> <li>• Sam Vance reported EMS personnel is in tier one in receiving the vaccine in Missouri. He said there are a little over 20,000 EMS people in Missouri now so availability will have to be considered.</li> </ul>		
<b>G. TCD Helen Sandkuhl</b>	See legislative discussion above.		
<b>H. MIH Community Paramedics Dr. Melissa Kroll</b>	No report	Contact Dr. Kroll at <a href="mailto:mkroll@wustl.edu">mkroll@wustl.edu</a> with questions or comments.	
<p><b>CARES Update.</b> Kristen Jones <a href="mailto:kristendjones@wustl.edu">kristendjones@wustl.edu</a> 630-640-1120</p> <p>There are 22 EMS agencies in MO participating in CARES. More are needed. Kristen would like to have 1 or 2 contacts from each EMS agency so she can offer information and training. Hospitals seems more reluctant to participate. It takes EMS agencies about one hour a month to complete CARES data entry. Gathering data to determine best practices etc. is the goal. Zoom training is available for EMS and takes about 45 minutes. Contact Kristen for more information.</p> <p>Financing for the CARES program is being sought. AHA has not responded to requests. Grants and other financing have not secured. \$14,000 a year is needed for the data collection. Helen Sandkuhl asked if the EMS Regions would contribute. No one was able to answer the question at this point. It was pointed out that CARES will not have a full picture if hospitals do not participate. There would be no outcome data.</p> <p>Debbie Leoni asked if EMS started the form and the hospital was to add to it. No one offered information. Debbie will follow up.</p>			
<b>III. Regional Subcommittee Reports</b>			
<b>A. Northwest</b>	Art Maxwell reported there was no meeting Oct.	Next meeting scheduled for the 3 <sup>rd</sup> Wednesday of Nov	
<b>B. Central</b>	No Report		
<b>C. Southwest</b>	Bob Patterson reported Southwest EMS Region met Sept. 25, virtual meeting only. Reviewed legislative issues especially those focused on TCD System. Jami Blackwell talked about alternate designation difficulties. COVID	Next meeting Nov	

	environment discussed.		
<b>D. Southeast</b>	Debbie Leoni reporting. Debbie said Jason White was present and gave an abundant legislative report. Debbie announced the opening of a new hospital in Cape Girardeau.	Next meeting is Dec 11	
<b>E. East Central</b>	<p>Helen Sandkuhl reminded all that Dr Keeperman has resigned as East Central Chair. He has accepted a position in Reno Nevada. The next meeting is Nov 13. Elections will take place then. In the meantime, Mark Flauter will lead the group.</p> <p>Helen asked if we want to support the CARES registry. She recognizes that only East Central has money. The other 5 Regions do not. She would like to have this put on the agenda for the EMS Regional Advisory Council meetings.</p> <p>All money needs to be received by end of the year. Must be a lump sum of \$14,000. (See the CARES info above)</p>	Next meeting Oct. 9	
<b>F. Region A/West Central</b>	<ul style="list-style-type: none"> <li>• Dr. David Gustafson said West Central has not had a meeting since the last SAC meeting. Next meeting is November 2.</li> <li>• Dr. Gus will reach out to MARCER to see if will support Cares with money.</li> </ul>		
<b>G. Regional EMS Medical Directors Dr. Sabina Braithwaite</b>	<p><u>Notes from Dr. Sabina Braithwaite:</u>  Regional Medical Director’s Committee Meeting  Meeting Date: Oct 27, 2020 at 1000hrs  Meeting Location: Zoom meeting ONLY  Attendees:  Committee members: Sabina Braithwaite, Erica Carney, Brian Froelke, Matt Brandt, Jeff Coughenour, Lindy Bowman, Jeff Umfleet  Other attendees: Kat Probst, Chris Mattes, Tom Lewis, Ruby Mehrer, Mike Wallace,</p>		

	<p>Mark Alexander, Bob Patterson</p> <p>I. Old business</p> <p>a. Minutes from Sept 22--APPROVED</p> <p>b. Legislative updates:</p> <p>i. TCD: (Mark updated) MHA working on regulations after meeting all summer. No one has seen yet. Includes TCD advisory council. State held meeting earlier in the month, there was concern that the whole thing would be turned over to MHA, but state is retaining and hiring into the open TCD coordinator position.</p> <p>II. Reports:</p> <p>a. East Central:</p> <p>i. Code 3 conference is on for March 11-12, stay tuned for details, let us know if you wish to speak, it will be open to the whole state</p> <p>b. Southwest:</p> <p>i. Looking at feasibility of isolation cocoon for patients (Ferno?)</p> <p>ii. Lifeline has been flying BiPAP COVID patients and has a fair bit of experience now, only 2 converted providers – looking in to whether that was occupational vs community conversion</p> <p>c. Northwest:</p> <p>i. Seeing multiple covid transfers weekly due to lack of ICU beds, having several episodes of diversion due to lack of beds</p> <p>d. Southeast:</p> <p>i. Recent hospital cyberattack shut down hospital and imaging</p> <p>ii. A lot of diversion for COVID happening</p> <p>e. Region A:</p> <p>i. Major issues with ICU beds and hospital capacity. EM Resource reflects plenty of beds, but this is not reality. Working with regional stakeholders and hospitals as well as MHA to try to help align EM Resource with actual</p>		
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	<p>availability. Regional plan does not adequately address the issues currently being experienced.</p> <p>f. Central:</p> <ul style="list-style-type: none"> <li>i. All trauma patients being tested. Elective surgeries being tested. Note that positives often turn out to be known (old, convalescent) positives. For asymptomatic pts, 1.5% positive rate only.</li> </ul> <p>g. BEMS Chief:</p> <ul style="list-style-type: none"> <li>i. State getting daily complaints on patients being refused / “diverted” by hospitals even once on hospital property (examples STEMI and cardiac arrest). Complaints are being forwarded to CMS for EMTALA violation.</li> <li>ii. ACS guidance exists on this</li> </ul> <p>h. CARES – no report</p> <p>III. New business</p> <p>a. Hospital diversion issues motions: Carney / Coughenour – APPROVED</p> <ul style="list-style-type: none"> <li>i. The Medical Direction Committee considers hospital declarations of patient diversion or similar terms suggesting lack of hospital capacity to care for patients as merely advisory and not in any way binding upon EMS. Appropriate reporting to state and CMS for EMTALA or regional plan violations shall be pursued when they occur.</li> <li>ii. The Medical Direction Committee believes that both agency EMS medical directors and regional medical directors shall be included in discussions with hospitals to develop system solutions to chronic hospital over-capacity situations as well as real-time situational awareness of bed availability within a region.</li> <li>iii. The Medical Direction Committee supports a regional approach to management of hospital</li> </ul>		
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	<p>over-capacity situations to balance patient care needs, EMS and hospital resource limitations in a collaborative fashion. Regional diversion plans reflective of a collaborative solution shall be created and followed.</p> <p>iv. The Medical Direction Committee believes generally patients are best served by continuity of care within the hospital system that usually provides their care or at the closest appropriate facility in the case of a time-critical medical issue.</p> <p>v. Disaster situations such as significant damage to the hospital physical plant which renders providing patient care unsafe may warrant full diversion, which shall occur in consultation with the regional medical director.</p> <p>b. TCD program issues – see above</p> <p>c. KC waiver for COVID fingerstick testing for EMTs – done by state.</p> <p>IV. Parking lot (will not address this meeting)</p> <p>i. 9-22: ACTION-- Think about what reports this committee would want Sam to run to monitor specific items on a regular basis.</p> <p>ii. HEMS utilization – NAEMSP / ACEP / AMPA position statement pending</p> <p>V. Adjournment</p> <p>Next meeting Nov 27, 2020 at 1000 -Zoom meeting ONLY</p> <p><a href="https://wustlhipaa.zoom.us/j/96145050684?pwd=bHRKbIRkdGNrOCs4aEdmZFNJb2p2Zz09">https://wustlhipaa.zoom.us/j/96145050684?pwd=bHRKbIRkdGNrOCs4aEdmZFNJb2p2Zz09</a></p> <p>Meeting ID: 961 4505 0684</p> <p>Passcode: 0526</p> <p>One tap mobile: 13017158592,,96145050684# US (Germantown)</p> <p>13126266799,,96145050684# US (Chicago)</p>		
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	<p><i>Helen Sandkuhl moved to accept the recommendations of the regional medical directors regarding diversions (as in III, a, i-v above). Second by Ben Chlappek. Motion carried</i></p>		
<p><b>BEMS</b> <b>Sam Vance, Chief</b></p>	<p>Sam Vance is reviewing regulations that had revisions suggested before he accepted the Job of BEMS Chief. He plans to schedule webinars to get feedback on proposed amendments.</p> <p>New DHSS Director of Licensing and Regulations starting November 2. Steve Bollin has 20 years experience, most recently with Mercy in SL.</p> <p>Sam directed people to the DHSS website to review COVID vaccine just received. EMS can sign up as providers.</p> <p>A document from BNDD has been sent out. It summarized the DEA changes. Impact is to be minimal for EMS in MO. Questions should be directed to BNDD.</p> <p>Missouri is close to being able to upload data to NEMSIS' national data bank. Sam was not sure if the data from previous years will be able to be uploaded.</p> <p>Sam said Biospatial (a free data collection company) remains in legal. Biospatial wants 600 data elements. MO privacy laws prevent some info from being released.</p> <p>TCD: Over the summer DHSSS discussed Havron report and ways to follow its recommendations. There was discussion about Stroke, STEMI and Trauma centers being designated by national organizations because evidence</p>		

	<p>shows nationally verified centers have better patient survival and outcome. However, MHA surveyed their hospitals and had a 95% return. 60% said they would support national certification, 33% said maybe and 7% had no opinion. DHSS has posted a vacant position for TCD support. The posted deadline is Oct 31. A meeting for the state TCD committee will be scheduled for November.</p> <p>DNR: In response to a question about the Do Not Resuscitate issue, Sam said he was not sure if Dr. Williams (DHSS Director) would require regs be written or not.</p> <p>Dr. Andrews said the Interstate Compact national leadership and the MO Interstate Compact subcommittee of SAC meeting that was scheduled for Oct 20<sup>th</sup> was postponed until Nov 10.</p>		
		<b>Recommendation/Actions</b>	
<b>Center for Patient Safety Shelby Cox</b>	No report		
<b>Old Business</b>	None		
<b>New Business &amp; Announcements</b>	Dr. Tan reported Dr. Bridgett Svancarek will be representing NAEMSP as the education representative for CoAEMSP.		

	<p>Dr. Tan briefly reviewed an incident that happened a few weeks ago in Aurora Colorado. At the center of the controversy was the use of Ketamine in the prehospital setting. Politicians voted to ban Ketamine without asking for any medical input. Dr. Tan said NAEMSP does not believe politicians should be able to alter the formulary of an ambulance based only on their opinions.</p> <p>Nov 6 NAEMSP is offering a free webinar on Ketamine use—looking at data from thousands of prehospital charts to determine how Ketamine is used and how often. Dr. Tan said common uses are for pain, excited delirium and airway management. Dr. Gustafson said most of his services use Ketamine, usually several times a month for chemical behaviors. Mark Alexander said Cox Health paramedics use it as well.</p>		
<b>Next Meeting</b>	Next meeting will be virtual and is scheduled for Nov 24, 2020.	An agenda will be sent prior to the next meeting.	
<b>Adjourned</b>	Meeting adjourned approximately 2:20 pm		

*Dr. Lynthia Andrews Bowman* DO, MHA, FACEP

Date Approved 11-24-2020

Dr. Lynthia Andrews, SAC Chair  
*Summary respectfully prepared by Ruby Mehrer*