GMVEMS Council General Meeting March 24, 2020

## PRESENT:

Elizabeth Beam, MVH/Website Chris Marker, Monroe Fire/President Elect Chris Freeze, Miami Valley Hospital/Education Sean Lehrter, Trotwood FD Brandon Barnett, Trotwood FD Greg Patterson, Dayton FD John Russell, Huber Heights FD/Standing Orders Jim Rinaldi, Miami Valley Hospital Michelle Pitstick, CCCHD/Hustead/PR Mike Guadagno, Washington TWP/Education Lauren Duffy, UC West Chester Leslie Gardone, Treasurer Barbara Hammersley, Box 21 Andy Harp, Miami Valley Fire District David Gerstner, DFD/MMRS/President Sandy Lehrter, GDAHA/GMVEMSC

<u>Call to Order</u>: The March 24, 2020 general meeting of the Greater Miami Valley EMS Council was called to order at 2:00 p.m. by President David Gerstner via Zoom online and by phone. Attendees were asked to identify themselves if they called in.

<u>Secretary's Report</u>: The draft minutes from the January 28, 2020 Council meeting were presented and attendees were asked to email Sandy Lehrter with any changes or corrections.

Treasurer's Report: No report.

<u>President's Report:</u> David Gerstner reported that he has authorized the purchase of a Vimeo account to be used for creating training and informational videos to be added to the Council website and COVID-19 resource page.

### Executive Committee Report: No report.

<u>Membership/Change of Voting Reps:</u> David reported that the following voting representative changes have been requested:

Farmersville FD: Jeff Erisman – Voting Representative Robert Lovell – Alt. Voting Representative The changes were approved.

The changes were approved

### **Committee Reports:**

### A. Administration

Budget & Finance: No report.

Code of Regulations/Legal: No report.

Nominating: No report.

**Public Relations:** Michelle Pitstick asked that nominations for the GMVEMSC Norma Dittrick and Tom Long Awards be emailed to her instead of being submitted online.

**Website Advisory Committee:** Elizabeth Beam reported that COVID-19 resources have been added to the protocol app.

### Social Media Committee: No report

**Communications Committee:** The 4G Modem project is complete. Quarterly Triage Days have been postponed for now.

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Legislative & Advocacy Committee: No report.

Grants Committee: No report.

## A. Medical:

**Drug Bag Exchange:** A drug bag update is being planned for May; more information will be shared when it is confirmed.

CQI: No report.

**Standing Orders:** Additional information to be sent out regarding COVID JITSOs. Won't need JITSO for solumedrol since the drug bag update is being pushed out to a later date. Standing Orders effective date hasn't changed yet. A question was raised regarding the possible addition of terbutaline to the protocols. Dr. Marriott said not at this time and Brendan noted that it isn't currently on our drug list so it would have to be added and everyone would have to get their updated lists approved by the Board of Pharmacy unless that requirement was waived.

**Infection Control:** Chad Follick reported that he has received some inquiries regarding the exposure policy and has sent the information to anyone asking for it. He has also received questions from departments wanting to know when to quarantine their crews. It was noted that the guidelines are on the Council website and on the COVID-19 resources page. Brendan reported that the hospitals are discussing the procedure for notification of EMS related to exposure. ODH is working on quarantine information for EMS.

# B. Pre-Hospital Care:

**Education Committee:** Chris Freeze discussed the potential extension of the protocol testing deadline but noted that testing is still open. He reminded members not to conduct group skills testing to practice social distancing. Concerns related to testing can be sent to Chris and concerns related to the Standing Orders database should be sent to Mike Guadagno.

Research: No report.

**Pediatric:** Heather Koss reported that the survey is open until the end of the month and 32% of Ohio agencies have responded.

### C. Ad Hoc Committees

EMS Run Sheets Electronic Health Record Integration: No report.

**Response to Violence against EMS:** Survey being developed jointly with hospitals and MMRS Mumbai Committee.

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## **Organization Reports:**

MC Fire Chiefs Association: Discussion centered around COVID-19 at most recent meeting.

Miami Valley Fire/ EMS Alliance: Andy discussed the new Director and assessment centers.

## State Board of Emergency Medical, Fire and Transportation Services (EMFTS): No report.

RPAB, Division 3: No report.

SORTS: No report.

GDAHA: No report.

**Metropolitan Medical Response System (MMRS):** David reported that activities have been centered around COVID-19.

### Old Business: No report.

#### New Business:

Larry Cleek, Public Health Dayton Montgomery County, provided an update of the COVID-19 situation in Montgomery County, the region, and the State.

Dr. Marriott/COVID-19:

- Protocol questions have been raised regarding transports calls are down to EDs and hospital censuses are low. No current need for alternate or no transport protocols, though they are being studied.
- drops in call volume at multiple departments, partially due to peoples fear of going to the ED but that will likely change as cases increase
- any departments with non-transport protocols were asked to send a copy to Sandy
- there is no indication to transport someone for testing most facilities don't have testing available and results take days
- even when quick tests are available you will still have to meet ODH criteria for testing
- Discussed the information sent out by Dr. Cunningham should we look at magnesium sulfate? It is a bronchodilator, but COVID-19 is not a bronchospastic problem; concern related to verbiage in her post related to crafting wording carefully to ensure departments are legally covered when non-transport protocols are used
- Aerosol generating procedures when should we be using nebulizers and when should we not? Avoid
  using aerosols to the greatest degree possible, use patient's personal inhaler when possible; benefit of
  nebulizer is low, and the risk is high
- High co-viral infection rate and there are several cases of the patient having more than one virus
- CPAP can be beneficial but is risky, however, it is preferred overusing intubation
- Transport to alternate sites? Not planned at this time alternate sites are usually for the less sick
  patients to be moved to from the hospitals to keep the sickest ones in the facility; surge capacity is
  being planned for staying on hospital grounds; medic traffic will flow as normal as possible
- Turn around time for test results has been fairly quick with ODH when they have testing kits available; Quest and LabCorp the turnaround is 2 to 2 ½ days, with some improvement from last week's timeframe; no one has in house tests at this time, they are going to California or Virginia for results

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- EMS crews should not congregate in EMS rooms at the hospitals, they should complete their task and leave to maintain social distancing compliance
- Testing of public safety individuals considered a Tier 2 by state guidelines for testing eligibility; UD Arena test site is currently the only location available locally other than the hospital when medically necessary; test results don't change the management of the illness but that may change as new treatment options are found discussion regarding testing tiers as defined by ODH. Physician order is required for testing in every instance
- When available rapid tests are supposed to provide results in 45 minutes; a lab will be able to do 16 tests in 45 minutes
- A question was raised regarding the use of solumedrol no benefit of steroids in treatment of COVID
- A question was raised regarding use of rescue airway versus tube rescue airway is probably not any better
- Recommend that every agency begin screening personnel prior to entering the building for their shift anyone sick should be told to go home and isolate; new standards related to employees returning to work are under review by ODH and Public Health – presently if someone doesn't come to work because of symptoms they can return after 72 hours with no symptoms without medical intervention and it has to have been 7 days since onset of illness – working on getting clarification and looking for resources for agencies to call to check for exceptions for public safety
- Discussion regarding quarantine versus isolation Larry Cleek provided clarification: quarantine is for someone who is exposed to a known case but has no symptoms, lasts 14 days and a representative from Public Health will check in with them regularly; isolation is for people who have symptoms but have no known exposure, lasts 14 days and is done at home when possible; there are a number of public safety workers in quarantine and some in isolation currently
- Information given about the COVID-19 for public safety site on the Council website updated recently, will post Public Health weekly situation reports, Ohio EMS situation reports daily, and videos; send David any best practices information you would like to share
- Nursing homes are worried because all of their patients are high risk dispatch centers will receive
  information to ask nursing homes to either bring the patient out the ems crew or meet them at the door
  when possible to eliminate the need for screening crews before entry; DFD is drafting a letter to nursing
  homes in the area explaining expectations of the facility
- Larry will share the information regarding screening with David to send out on the listserv and share on the website
- Bulletins will be sent out containing information related to conserving PPE and other key points for EMS; should try to use PPE for more than one shift if possible – there are public safety agencies in our area that are out of PPE

<u>Educational/Organization Announcements</u>: Chris Freeze – no final decision regarding an extension for the protocol testing deadline, still under discussion and any decision will be shared on the listserv.

Adjournment: There being no further business, the meeting was adjourned at 4:00 p.m.

sjl