



Emergency Medical Services Council



HENNEPIN COUNTY EMS COUNCIL MEETING

April 11, 2024 – 3:00-4:30 p.m.

online meeting

<https://www.hennepin.us/business/work-with-henn-co/ems-planning-reg>

Mission

We represent a system of pre-hospital care, striving to improve all aspects of the patient experience, by the collaborative development, use, and promotion of best practices.

Service

People serving on the EMS Council, committees, and work groups shall:

- Bring their own training, experience, and professional codes to EMS Council deliberations.
- Know and express the values and interests of their affiliated organizations.
- Serve the best interests of patients.

AGENDA

Welcome and introductions – Todd Joing, M.D., EMS Council Chair

- 1 **Action:** Approval of today's agenda
- 2 **Action:** Approval of October 12, 2023 meeting summary
- 3 **Action:** EMS Council nominations

EMS Council

- Megan Elsenheimer Plutt, MD to replace Brittany Philpot, MD as rep for Abbott Northwestern Hospital and West Health
- Brittany Philpot, MD to replace Marc Ellingson, MD as alt. rep for Abbott Northwestern Hospital and West Health

Executive Committee

- Tony Martin, as Operations Committee Chair
- Mike Morelock, as Quality Standards Committee Chair
- Nick Simpson, MD as Medical Standards Committee Chair

Quality Standards Committee

- Zach Finn, MD (North Memorial Health EMS) for vacant seat as EMS Medical Director for an EMS Provider of unscheduled 9-1-1 service in Hennepin County

- 4 Recognition of Service on the EMS Council - Todd Joing, MD as Chair of the EMS Council; Marc Conterato, MD as Chair of the Quality Standards Committee

- 5 Presentation: “2024 Legislative Update” by Dylan Ferguson, MA/NRP, Executive Director, EMSRB
- 6 New Business
Action: Quality Standards Committee
 Quality Assurance Metrics for Trauma and Stroke (p.3)
- 7 Old Business
 Ordinance 9 - EMS Staffing Study update– Kristin Mellstrom, EMS Council Staff
- 8 Committee Reports
EMS Medical Directors Committee Report – Peter Tanghe, MD
Medical Standards Committee Report – Nick Simpson, MD
Operations and Communications Committee Report–Tony Martin
Quality Standards Committee Report – Mike Morelock
Executive Committee Report – Todd Joing, MD
- 9 **Staff Report** – Kristin Mellstrom
- 10 **EMS Council Member Reports**
- 11 **EMS Partner Agency Reports**
- 12 **Interested Parties Reports**
- 13 **Action: Adjourn**

Next EMS Council meeting: Thursday, Oct. 10, 2024; 3:00-4:30 p.m. (online)

EMS Council member orientation session: May 1, 2024 at 11:00-12:00 (online)

2024 Meeting Calendar

- **EMS Council** 3:00-4:30pm on 2nd Thursday of April and Oct.
- **Executive Committee** 1:00-2:30pm on 2nd Monday of March-June-Sept.-Dec.
- **Quality Committee** 1:30-3:00 on 1st Tuesday of Feb.-May-Aug.-Nov.
- **Operations Committee** 9:30-10:30am on 2nd Tuesday of Jan.-April-July-Oct.
- **EMS Medical Directors** 12:30-2:30p on 4th Tuesday of each month-tentative
- **Medical Standards Committee** 12:30-1:30pm before the EMS Medical Directors mtg in March-June-Sept.-Dec.-tentative

ACTION: The Quality Standards Committee moves to adopt Trauma and Stroke Metrics for ongoing quality assurance monitoring.

- Public Health Department staff will collect, aggregate, and report quarterly and annual data from each 9-1-1 ALS EMS provider or from databases that are approved by the Quality Standards Committee.

Quality Assurance Trauma Metrics

- Scene time of less than 10 minutes (yes/no)
 - At patient time to departure from scene; use usual exclusions for real outliers, report to 90th %ile, and exclude prolonged/delayed scene time if identified by crew
- Vitals are documented (yes/no) for 1) heart rate; 2) blood pressure; 3) respiratory rate
- Glasgow Coma Scale (yes/no)

Quality Assurance Stroke Metric

- Stroke On Scene Time for EMS of less than 20 minutes (yes/no)
 - Hennepin County emergent transports only
 - Transport Mode Descriptors = Lights and Sirens
 - Primary Impression = CVA, TIA, or Stroke; not Intracranial Hemorrhage
 - Use time stamped scene time arrival (not patient contact time recorded by medics) and departure from scene time
 - Report data to the 90th %ile
 - Exclude real outliers: Exclude data points below the First Interquartile Range (IQR) minus 1.5 time IQR; also exclude data points above the Third IQR plus 1.5 IQR.
 - Do not include patient identifiers (e.g. name, address, run number, DOB)