

# Kitsap County EMS and Trauma Care Council Medical Officer's Meeting Minutes

September 20, 2006  
Readiness Center  
Bremerton, WA

Attendees:

Barb Lovato	KCEMS	Rachel Kaperick	KCEMS
Jay Lovato	CKFR	Kim Doyle	Olympic
Stan Plyler	BFD	Elizabeth Gonzalez	KCEMS
Butch Lundin	BIFD	Cliff Wilson	SKFR

Meeting called to order by Chairman Stan Plyler at 10:00am.

The meeting change back to the third Wednesday at 10am has been a great change.

## Barb's Report

The EMT class is up and running with a couple of ongoing issues. The outside door was left propped open after a Saturday class. Instructors have been reminded to absolutely secure that door going forward. There are 30 students in the class.

The January EMT class conducted through the college will held at the Readiness Center

Recertifications are going well. They have started being done through the online process. The Medical Officer must verify training before sending it on to the MPD. In order to address provider issues the EMS office would like to do random audits for verification of the process.

Agencies that are currently without a Medical Officer are asked to send a representative until the Medical Officer has been replaced.

Stan and Kim both spoke up about keeping the ACLS and PALS classes in our county.

Barb will finish up the list of equipment donation requests via email now that computer issue is resolved.

Rachel will check on the status of the classroom tables.

Providers have been complaining of having difficulty contacting the Region for recertification exam scheduling. It was determined that this issue is resolving with the implementation of the OTEP program as providers will no longer need to take the state examination.

Elizabeth

Online OTEP Provider Procedures are the modules online are completed by all EMT's, for EMT-IV's there will be an additional module and for EMT-P there will be the additional BSM requirements and CE time. All providers will have a practical component. Protocol tests will be created for each OTEP Module.

Providers that come from a county that follows CE rather than OTEP may have to take the state test. Individuals coming into the county from another area will need verification that the provider is in good standing.

There was significant discussion regarding the verification of provider status when being offered employment by an agency in this county. Traditionally ALS providers are verified through the MPD of the county in which they are currently certified. BLS providers are verified by the EMS office or the agency of employment. Elizabeth will research this matter and work with the Agencies to assure appropriate and timely verification of certifications.

No protocol tests until a new test is written.

Protocols

The Region has met with the MPD's regarding protocols. At Regional meeting the Training Coordinator was given a deadline of ten days from Regional Council meeting. It was determined that patient care was not substantially affected so we will wait for the finished copy.

QA/QI does not seem to be working as well as it could. Dr. Eisenberg has requested the Medical Officers to provide more overview and support for the peer to peer counseling to be more effective.

Kim stated that Olympics policy for the shift leads to review all reports and she randomly pulls reports. If there is an issue she does a 100% review until the problem is resolved.

QA results did not turn into the educational opportunity it was planned to be. Now, with OTEP, we can retrain on issues discovered in QA trends. A plan is under construction for QA and follow up training. We need to identify the elements that will make the QA process successful and continuous. The forms used in the peer review process rarely come back for review by the group. Could the forms be emailed or should we consider carbonless forms that are numbered? There seems to be an overall lack of response to returning forms.

Officially, pulling of providers protocols is a state process. The MPD cannot pull protocols without the approval of the State. Immediate revocation of protocols is implemented when there is credible evidence that the individual poses and immediate threat to the health and safety of the public.

QA should be used to identify training issues or the need for the purchase of new equipment. An effort should be made to helping personnel understand that the purpose of QA is to identify training and equipments needs.

If a QA representative is unsuccessful in communicating with a provider or getting them to cooperate the issue should be taken to the Medical Officer for assistance.

Positive QA comments from the MPD have been received positively.

Testing and Standards

Testing and standards needs more participants.

Working MCI Group will meet the third Wednesday at 1pm.

Teleconferencing was approved for SKFR.

Adjourn

Meeting was adjourned at 12:00pm