

Medical Care Committee
Meeting Minutes
7/17/07

- 1) The meeting was called to order. Chairman John Scott in attendance.
- 2) The agenda was set as listed below and a brief overview of the previous meeting was provided.
 - a) Goal 5.5 MQA
 - b) Goal 5.4 STEMI / Cardiac Care
 - c) Goal 5.1 Medical Errors
- 3) **Goal 5.5 MQA**, Ensure appropriate transport. The committee agrees that this goal would be best accomplished by working with the State Quality Managers Committee (QMC) AKA EMS Medical Review Committee (EMSMRC). Mr. Angel Nater, a representative of the QMC would like to reintroduce the Quality Indicators Handbook. This handbook was produced by Mr. David Fareweather as a guideline for establishing a state QA /QI process. The committee agrees that the handbook should be made available to committee members at the October meeting. A complete review of the handbook along with recommendations would be considered at future meetings. If the handbook were accepted with or without revisions, additional endorsements would need to be collected prior to establishing a detailed MQA process in 64E.

Further discussion revealed that concerns related to MQA and its relationship to the disciplinary investigation process. The committee agrees that these two disciplines must remain independent of each other in order to maximize their process. Also linking customer service with MQA was also identified as concerning. Customer service related data is subjective in nature and not objective and therefore cannot be used in the true MQA outline.

Additional resources that relate to the MQA process would also be introduced at the next meeting. That resource would include paramedic text and the American College of Emergency Physicians book on QA in EMS.

- 4) **Goal 5.4 STEMI / Cardiac Care**, Improve effectiveness of on site EMS treatment. AHA representation was not available to report. However it was know that the Cardiac Legislative package did “die” in legislation. EMS concerns were related to technology, cost and training related to this package. Further discussion will resume at future meetings.
- 5) **Goal 5.1 Medical Errors**, Improve EMS Transport Safety. The focus was place on Medical Errors and how to reduce them. Dr Nelson suggested that the committee should work on providing measures to minimize Medical Errors. By adopting hospital developed measures such as 2-person review of medication administration, Brozlow tapes, laminated information cards such as those produced by AHA, and PDA’s. Examples of these pre-developed tools will be provided at the next meeting.

Another concern for EMS Transport Safety would include supporting and developing Nadine Levic's transport safety in the rescue unit. The use of seat belts, protective headgear, and the ability to secure equipment in a moving vehicle would be some examples. Also educational material related to this topic would be required to support the development and funding of this initiative.

- 6) There were no further topics of discussion and the meeting was adjourned.