

# Minutes for Calhoun County Medical Control Authority (CCMCA)

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**Location:** Kellogg Community College, LT-304

**Date:** July 18, 2022

**Time:** 9:00 AM – 10:30 AM

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## Attendees:

Dorothy Malcolm	Brian Walls (remote)	Robert Miller
Dr. Chet Dalski	Michael Armitage	Guest: Anthony Pantaleo (EMS Opioid Outreach Coordinator, Bureau of EMS, Trauma, and Preparedness, MI DHHS)
Dr. Ginger Swiderski (remote)	Daryl Cummings	Guest: Dennis Baskin (Dean of Workforce Development, KCC)
Tracy Hickey	Marty Erskine	Mary Louise Stefanski, Recorder
Steve Frisbie	Shea Peters	<b><i>NOTE: EXCUSED ABSENCE:</i></b>
Nick Smith	Matt Godde	Teresa Dawson and Angie Brown (per email transmittals)

## Call to Order:

Meeting called to order at 9:03 AM by Chairperson Dorothy Malcolm.

## Introductions:

Tracy Hickey, DON, was introduced as the current hospital representative for Bronson Battle Creek (BBC) for the CCMCA. The letter of appointment has been received documenting this appointment. All others did a self-introduction and Dorothy welcomed everyone.

## Additions or Deletions:

Matt Godde requested addition of Bees Study protocol for New Business Discussion.

## Approval of Minutes – January 24, 2022

Chet Dalski made a motion to accept the meeting minutes from April 18, 2022, as presented. Steve Frisbie seconded the motion. Motion passes.

## Public Forum:

None

## Reports:

### Financial Report

Rob Miller provided a handout of the May 31, 2022, report with cash held, end of the year in the amount of \$109,534.16. It was noted that the June 30 report is not yet available. Mr. Miller will have the June 30<sup>th</sup> report together with the most current available to report out at the October meeting. Financial Report accepted by majority vote.

## **Medical Director Report**

PSRO Meeting Update: Ginger Swiderski

At the last CCMCA quarterly meeting (July 18, 2022), Dr. Swiderski suggested sending out a survey to PSRO membership to secure a more common date/time to allow for better participation. The last two meetings scheduled were shallow with only 1-2 attending and would like greater participation for everyone's considerations to be heard. These meetings provide a review of what we are doing well and where to look for improvement. Meetings are for the purpose of improving the quality of medical care. These meetings exist to promote the EMS system and organize and integrate quality assurance activities to ensure the delivery of consistent, quality emergency patient care for our CCMCA region. Membership shall be composed of medical first responders, ALS providers and ambulance service providers and to be conducted by the medical director for our region for information and data collected and reported. These meetings may also review proposed and revised protocols as they pertain to quality improvement, patient care, or special circumstances, i.e., incident reviews, assessment and improvement processes, protocols, EMS personnel, equipment, medications, etc., that may affect patient outcomes, reporting, retraining. Also Dr. Swiderski looking for a way to get that data information quicker. Dorothy and Chet reiterated the access for data reporting should be pulled from the online system. Feedback from this data is important for improvement purposes and Dr. Swiderski to provide feedback to PSRO membership. If a particular case is to be reviewed Dr. Swiderski can provide you with further information and discussion from the group.

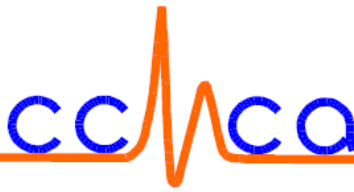
## **Old Business:**

**PSRO Meeting Update: Dr. Swiderski**

Information provided in the Medical Director Report noted above.

**Recap of Electronic Vote 9.9 Naloxone (Narcan) Administration 10.26.18) and 9.6a Naloxone Contents and Distribution Procedure (Optional) Naloxone Exchange Protocol: Chet Dalski.**

Chet reported there was a unanimous vote on 9.9 Naloxone (Narcan) Administration 10.26.18 and 9.6a Naloxone Contents and Distribution Procedure (Optional) Naloxone Exchange Protocol. Below is an excerpt taken directly from the May 5, 2022, memo to Dorothy Malcolm, Chairperson with a cc to CCMCA Board Members:



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**TO:** DOROTHY MALCOLM, CHAIRPERSON

**FROM:** CHET DALSKI, SECRETARY/TREASURER

**SUBJECT:** RESULTS OF ELECTRONIC VOTE ON:  
A) 9.9 NALOXONE (NARCAN) ADMINISTRATION 10.26.18  
B) 9.6a NALOXONE CONTENTS AND DISTRIBUTION PROCEDURE  
(OPTIONAL)/NALOXONE EXCHANGE PROTOCOL

**DATE** MAY 5, 2022

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**CC:** CCMCA BOARD MEMBERS

Below are the current results of the email vote on the proposals emailed on 4/27/22 at 3:38 pm regarding Narcan. As you may have heard, KCC did suffer a cybersecurity attack Friday afternoon. While our email system was up most of the time since then, it was down for a short time. If you voted and it is not recorded below, please resend your vote so that I can update it on the final tally for the next meeting. Motion 1: "That the CCMCA Board of Directors Modify protocol 9.9 on Narcan to include the additional options of allowing EMT's to administer AND the carrying of 4.0 mg intranasal spray."

Michael Armitage	No Vote
Angie Brown	Yea
Kathy Cowles	No Vote
Daryl Cummins	Yea
Dr. Chet Dalski	Yea
Theresa Dawson	Yea
Martin Erskine	Yea
Steve Frisbie	Yea
Dorothy Malcolm	Yea
Nick Smith	Yea
Dr. Ginger Swiderski	Yea
Brian Walls	Yea

***With a majority of Yea's, the motion passes***

***Motion 2: "That the CCMCA Board of Directors adopt the Optional Naloxone Medication Kit Contents and Distribution Procedure (section 9-6a) as presented removing the face shield option."***

Michael Armitage	No Vote
Angie Brown	Yea
Kathy Cowles	No Vote
Daryl Cummins	Yea
Dr. Chet Dalski	Yea
Theresa Dawson	Yea
Martin Erskine	Yea
Steve Frisbie	Yea
Dorothy Malcolm	Yea
Nick Smith	Yea

Dr. Ginger Swiderski Yea  
Brian Walls Yea

**With a majority of Yea's, the motion passes**

**CPR2 BVM Project: Dr. Swiderski**

Regarding the Bag-Valve-Mask (BVM) project often referred to as CPR2, Dr. Swiderski passes along a “thank you” to everyone for undertaking the training.

**New Business:**

**Welcome Board Member: Dorothy Malcolm**

Dorothy introduced Tracy Hickey, DON, representing BBC Hospital.

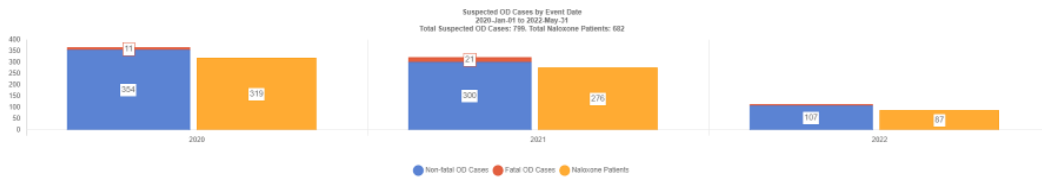
**Leave Behind Protocol and Training: Anthony Pantaleo, EMS Opioid Outreach Coordinator, Bureau of EMS, Trauma, and Preparedness, MI DHHS**

Mr. Pantaleo has worked with Chet Dalski and Dr. Swiderski on the Narcan protocol. Protocols are in place here in the State of Michigan. Opioids are here to stay and have not gone away and getting worse.

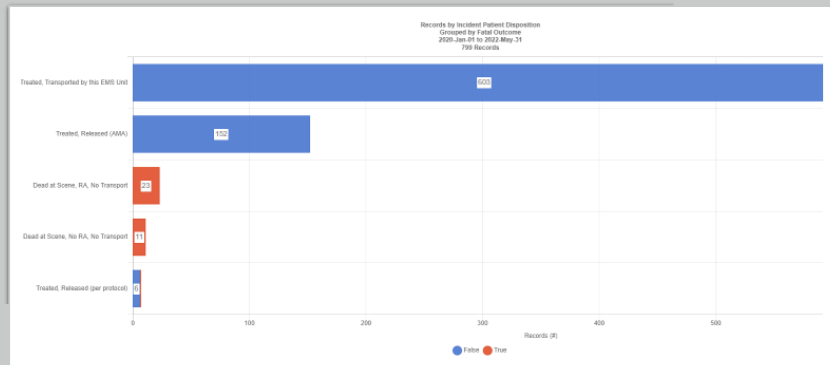
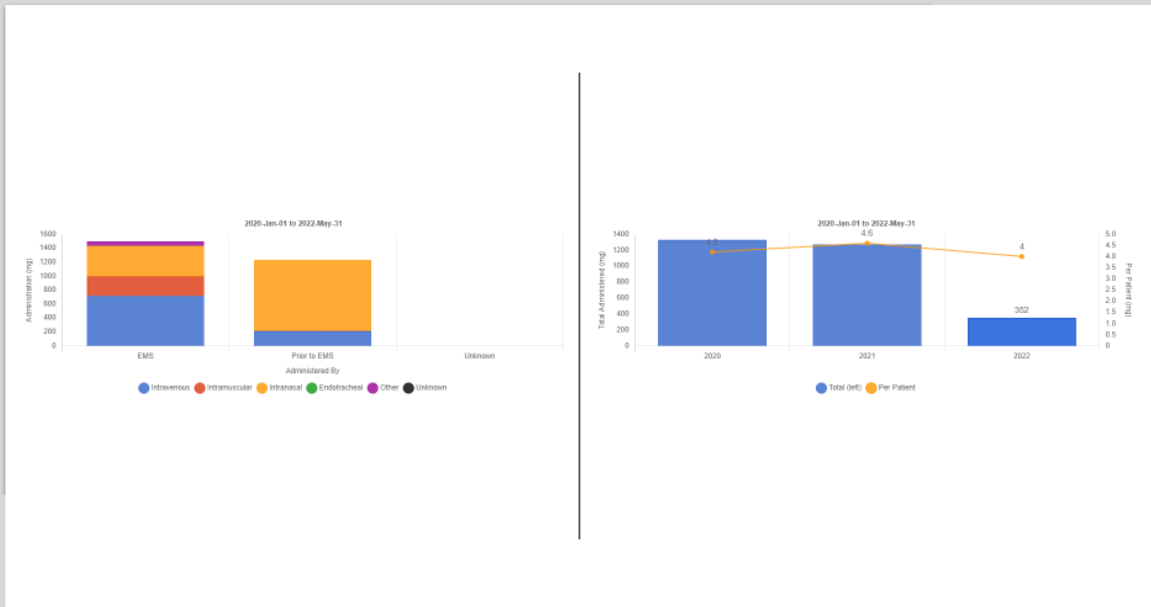
Mr. Pantaleo presented a PowerPoint presentation with data pulled together for Calhoun County. In January 2020 about 800 overdose cases reported in Calhoun County which is above the State average; Naloxone averages about 85% of overdose patients and the State average is about 76%. Calhoun County is below the average on transports. Naloxone is about 4 mg per patient which is down from last year. The 30–39-year-olds are the primary group for Calhoun County—this age group makes up about 50% of that group reporting. Small age group is that of under age 20.

# Calhoun Co Opioid Overdose Data

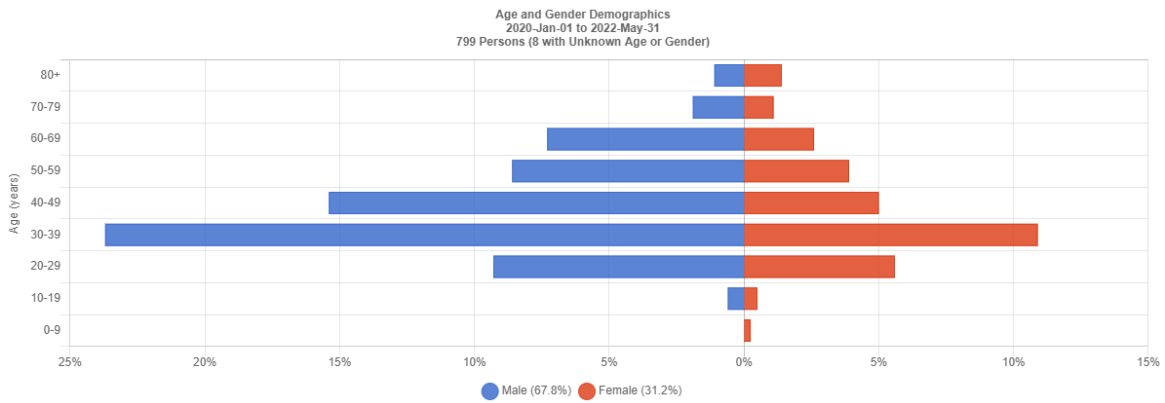
January 1, 2020-May 31, 2022



- 85% receive naloxone
  - 76% state average



- 75% transport to ED
  - 88% state average



Showing 1 to 10 of 83 entries

MI	Calhoun	799	<b>59.81</b>	133,580	365	321	113
MI	Genesee	2,397	<b>59.22</b>	404,794	1,014	991	392
MI	Wayne	9,970	<b>57.28</b>	1,740,623	4,038	4,297	1,635
MI	Bay	556	<b>54.30</b>	102,387	205	254	97
MI	Muskegon	912	<b>52.45</b>	173,883	351	396	165
MI	Ingham	1,500	<b>51.62</b>	290,609	600	627	273
MI	Kalamazoo	1,053	<b>39.59</b>	265,988	405	494	154
MI	Saginaw	732	<b>38.55</b>	189,868	273	335	124
MI	Clare	112	<b>36.40</b>	30,771	56	37	19
MI	Jackson	564	<b>35.94</b>	156,920	230	258	76



Calhoun Co Opioid  
Slides July 2022.ppt

Access to Naloxone and Leave Behind protocol most areas in the State 23 of 59 MCAs have adopted this protocol are doing this in transport agencies. The Leave Behind protocol basically allows you to leave the kit once you are ready to depart the scene. Exchange protocol which the CCMCA has just adopted is also a part of the process. This does not preclude treatment protocols. The process to secure the leave behind

kits does not change. One kit is for treatment and the other kit is for leave behind. Storage process is the same as what is currently in place. As a kickoff for this leave behind kit you may want to start with your transport agencies. Replacements are handled through the pharmacy. Anthony also stated he is willing to assist and present BVM training.

Motion by Chet seconded by Daryl to adopt the Naloxone and Leave Behind Protocol Section 7-26 by the CCMCA by all interested in carrying the leave behind packets and agencies who have voluntarily decided to carry the leave behind packets. It will be the agencies responsibility to create new packets upon the leave behind kit. The CCMCA will provide you with your initial kits and provide you with a State flyer. Agencies will provide tracking on a spreadsheet for PSRO reporting. Motion carries.

**Request to Rescind 14.03 Emergency COVID Protocol: Michael Armitage**

There has been some uncertainty if this was handled at the October 18, 2021, meeting and bringing it back to update everyone.

Dorothy has verified that this was indeed handled at the October 18, 2021, CCMCA Quarterly Meeting.

Below is an excerpt taken directly from the October 18, 2021, CCMCA Quarterly Meeting Minutes:

14.03, Dispatch Screening Guidelines for COVID-19 Outbreak. Michael Armitage put in a request to add this to the agenda. 14.03 is referring to dispatch guidelines. The question is if this protocol is necessary as other counties have dropped it. Feedback is that it is no longer necessary. It was shared that the fire chiefs feel the same way.

There is a need to fill in the approval information and update the app so that medical facilities using the protocols are aware which are approved and rescinded with dates. Dr. Dalski will look into needs to update this information. Clark Imus will be contacted to get more information. The State has adopted these protocols, the question is about the County adopting the protocols.

**14.03 – to rescind**

Referring to dispatch guidelines, if previously approved.

**Discussion**

Is this still necessary as all first responders are wearing PPE? This would remove the COVID questions that are asked. If people present with COVID symptoms, it would be listed in the call notes.

**Motion**

Daryl Cummins made a motion to rescind protocol 14.03, Dispatch Screening Guidelines for COVID-19 Outbreak. Steve Frisbie seconded the motion.

Motion Carries.

**Reduction of Lights and Sirens Response to the Scene Section 8-7: Steve Frisbie/Dr. Swiderski**

Steve states this is a statewide issue to reduce lights/sirens on 911 calls. This has been in place already in quite a few counties in Michigan and across the nation. We may need to change from “priority 1” to “priority 2” for these types of 911 calls. Discussion volleyed back and forth and resulted in bringing this to discuss further at the Board level and to develop a workgroup for this issue and fine tune a protocol for



this CCMCA Region. Nick and Steve recommended a small workgroup be pulled together to work on this issue and work on a model developed by St. Joseph County for guidance. Dr. Swiderski was called upon to lead this subcommittee group. After much discussion it has been decided to table this concern for the October 3, 2022, CCMCA meeting.

Motion to develop a subcommittee group and table the implementation of Lights and Sirens Response to the Scene — Section 8-7 made by Steve and seconded by Nick. Motion carries.

**Agency Relicensing Issues: Chet Dalski**

On requests for relicensing for agencies, everything is handled electronically through the State and the online system. Dr. Swiderski can handle after the online process has been requested and then Dr. Swiderski can authorize the request. No additional action taken.

**Bees Study Protocol: Matt Godde**

With the cost of EpiPens (auto-injector) being expensive and MFR agencies called to administer epinephrine, Matt has been working with Clark Imus here at KCC about developing a training program for our region agencies. This is sweeping through a lot of MCAs and Anthony stated there is online training developed. The training option will require a sign-off by the agency. Matt is working with Dr. Swiderski to push through a general treatment protocol for anaphylaxis/allergic reaction. In cases of severe allergic reaction, (wheezing or hypotension), reactions are time sensitive to administer epinephrine via auto-injectors. There is a cost to get equipped and emergency pharmacies will handle the charge for exchange of supplies used/expired. Today we have two motions with regard to General Treatment Protocols Anaphylaxis/Allergic Reaction Section 1-6A to consider.

Motion by Steve and seconded by Marty to proceed to adopt the protocols established in Section 1-6A. Motion carries

Motion by Nick and seconded by Steve for the CCMCA to cover the initial cost for agencies to get equipped. Motion carries.

**Next Meeting Date: Dorothy Malcolm**

Dorothy made the announcement that the next CCMCA Quarterly Meeting is to be held on October 3, 2022, 9:00-10:00 AM.

**Adjournment:**

Motion to adjourn by Marty and seconded by Daryl. Meeting adjourned at 10:54 AM.

CD/mls