Minutes for Calhoun County Medical Control Authority (CCMCA)

Location: Kellogg Community College, Student Center—Kellogg Room

Date: January 17, 2023

Time: 11:00 AM – 1:00 PM

Attendees:

Dorothy Malcolm BBCH, Administrator	Marty Erskine Marshall Fire Dept.	Jess Hanley (Guest representing Bronson EMS Liaison)
Dr. Ginger Swiderski Bronson, Emergency Medicine	Brian Walls (remote) Albion Community Ambulance (Emergent Health) Provider	Kristin Visel (Guest representing BBCH, ED Manager)
Theresa Dawson (remote) Oaklawn, Administrator	Angie Brown (remote) Oaklawn, ED	Dr. Summer Liston-Crandall (remote and Guest representing Oaklawn Hospital as CMO)
Dr. Chet Dalski KCC Training Representative	Erin Allwardt (Guest representing Calhoun County 911 for Mike Armitage)	Dr. Allison Field (remote and Guest representing Oaklawn Hospital as ED Medical Director)
Nick Smith Marshall Area Firefighter Ambulance Authority	Clark Imus (Guest representative KCC Faculty EMS Education Coordinator)	Dr. Rob Prodinger (remote and Guest representing BBCH as ED Medical Director)
Tracy Hickey BBCH, ED	Ron Ivey (Guest representing KCC)	Katie Sparks (remote and Guest representing BBCH, Trauma Services)
Steve Frisbie LifeCare Ambulance Provider	Bill Beaty (Guest BC Fire Chief)	Mary Louise Stefanski, Recorder

Call to Order: Dorothy Malcolm

Meeting called to order at 11:05 AM by Chairperson, Dorothy Malcolm.

Additions or Deletions: Dorothy Malcolm

None.

Introductions requested by Chairperson, Dorothy Malcolm

See Attendees as displayed in the table above.

Approval of Minutes-July 18, 2022: Dorothy Malcolm

Nick Smith made motion to accept the meeting minutes from July 18, 2022, and October 3, 2022, as presented. Steve Frisbie seconded the motion. Motion passes.

Public Forum: Dorothy Malcolm

None

Reports:

Financial Report: Dr. Dalski

The CCMCA Financial Statement of December 31, 2022, was made available to the CCMCA Board Members prior to the start of the January 17, 2023, meeting. Dr. Dalski announced there is a balance of \$223,910.56 total net assets; Mutual investment fund with RW Baird totaling \$114,376.40 a balance of cash on hand in the amount of \$102,175.66; There are no outstanding bills to be paid. Steve announced he would like a review of the cash on hand amount as reported on the December 31, 2022, CCMCA Financial Statement and look at a better realistic balance. Steve is requesting better planning for cash on hand and further discussion at the next meeting. Motion to approve the Financial Report as presented made by Marty Erskine with support of Dr. Swiderski. Motion carries.

KELLOGG COMMUNIT CCMCA - Financial State December 31, 2022				
	ASSETS			6/30/2022
Cash - held by KCC Mutual Funds - RW Baird		\$	102,175.66 117,229.10	\$109,534.16 114,376.40
Loans Receivable: MAFF				
	Total Net Assets	\$	219,404.76	\$ <u>223,910.56</u>
NOTE - There are no know	rn liabilities.			
	REVENUE & EXPENSES			
Revenue Investment Income (I	(222)	\$	2,852.70	\$ (2,880.53)
Other	Luss)	Ф	2,832.70	- (2,000.33)
	Total Revenue		2,852.70	(2,880.53)
Expenses		_	7,358.50	22,240.00
	Revenue over (under) expenses		(4,505.80)	(25,120.53)
	Beginning Net Assets	_	223,910.56	249,031.09
	Ending Net Assets	\$	219,404.76	\$ 223,910.56
Cash held, beginning	Cash Proof of the year \$ 109,534.16]		
Revenue received	-			
Expenses paid MAFF repayments	(7,358.50)			

Old Business:

Epinephrine Program Training Updates (BEES) - Chet Dalski/Clark Imus

Clark has been working and continues to work with Matt Godde on the Epinephrine (EPI) Training Program. Have piloted the program with Bedford Township Fire and encountered little to no problems utilizing the resources. Using a combination of in-class presentation, PowerPoint slide presentations. classroom activities, video presentations (recorded on You Tube) Online Microsoft form/quiz, paper quizzes, skill sheet form for IM injection to provide consistency with all aspects of the training. We have also received positive feedback with the assessment at the end of the training and ready to roll the process out with the agencies to be trained. Still encountering some supply issues for the Epi training kits but there will be no pause for the training roll out process. Each agency will be provided with two kits on board and will be able to swap kits out before expiration date of 5-6 months. Will work with the agencies to make sure everyone is aware that it is available. A Certificate of Completion will be issued from our MCA. Nick and Steve asked if this will roll out like the BVM training and Clark responded it will probably follow that same process which worked well. The EPI training will probably be a slower roll out for all participating. Here at KCC—now all initial training of first responders and EMTs include injection training and will be training with the updated protocols. Training is ready and everything is on the KCC website and working on the communication links to notify agencies needing training. Tracking of individuals will also be a component of those who have received the training.

Reduction of Lights and Sirens Response to Scene Section 8-2 – Steve Frisbie

Steve spoke with Lori (Committee members: Steve, Lori, Mike Armitage, Dr. Swiderski and Daryl Cummings) before today's meeting and will move forward working with Lori and Mike for continuation for a resolve. Mike and his folks from the Calhoun County 911 office have folks in place with deputy director. The Calhoun County 911 upgrade is underway. Will require some protocol change and Dr. Swiderski will need to be involved at some point. Would like to follow the St. Joseph county model to begin with on the Priority 1 responses. St. Joseph has shown a reduction in response time. The protocol is a State directive. A protocol process the State is pushing out and there may be no other choice but don't know for sure. This protocol is a better source for categorizing the calls coming in. This is based on safety and matching up with the right resource—medically driven v. what the priority really is. Chet stated this protocol is currently in a revision state. Chet has been requested by Dr. Swiderski and Dorothy to send out both versions so as to see the original and the revisions (side-by-side) to the CCMCA board representation. We will probably have until the end of the year for a final review approval. As noted . . . this is work still in progress.

Protocol Committee for Protocol Review - Chet Dalski

- Protocol Committee for Protocol Review
 - o Dates: MCA has 10/22-12/22 to review and adopt protocols
 - o January 1, 2023, protocols CAN be implemented.
 - o Emergency Protocols 14.02, 14.03, 14.09, and 14.10 all expire 11/18/22

Dr. Dalski note that the Emergency Protocols 14.02, 14.03, 14.09, and 14.10 all expire 11/18/22 for our region. The State is in the process of reviewing protocols which are to occur every 3 years which is listed on the State website. Lately it is taking 5 years for the review protocols to be completed. Chet posed a question: do we establish a protocol subcommittee or allow the CCMCA Board as a whole to take that charge for reviewing protocols? One recommendation was for this to be a discussion item at the PSRO meeting and establish a subcommittee to review them in batches. PSRO group to review and recommend.

Steve and Chet mentioned that there should be no change for the first quarter and likely June 2023 would be a due date for all to be implemented which has not yet been established. Dr. Swiderski mentioned she would be the first individual to explain and make recommendation. We'll try this process and if it doesn't work, we can revisit the situation for another meeting discussion.

This carryover item from the October 3, 2022, meeting is still work in progress and have no new updates to report. As it stands currently, this has not yet confirmed. This will more than likely be handled with change of leadership of new Secretary/Treasurer to be named and voted upon.

Bylaw Compliance Issue - Chet Dalski/Dr. Swiderski

- Bylaw Compliance Issues raised by the State
 - o Meeting on 9/26/22 with Dr. Swiderski and Dr. Dalski with Kristine Kuhl
 - o Issues raised with board composition not in compliance with law. Must be hospital majority on CCMCA board.

Dr. Dalski had a phone conversation regarding the CCMCA Board Composition with Kristine Kuhl, (MCA Coordinator, etc.), and Dr. Swiderski, CCMCA Medical Director & Executive Board Member, representing Emergency Department Physician, on Monday, September 26, 2022. The State has a couple of issues with our CCMCA Board composition with the Bylaws we operate under. The issue that Ms. Kuhl raised that the CCMCA doesn't meet the statutory requirements for medical control composition; it has 6 hospital representatives and 7 non-hospital representatives which underlies the concern Ms. Kuhl brought forward in the conversation with Drs. Swiderski and Dalski. Bylaws state chairperson has to be from hospital together with Vice Chair. Ms. Kuhl shared that they are reviewing medical control compositions and trying t make sure all are in compliance with the various statues, and this was an issue for her. Other issues are having the medical director being a voting member of the Board which is a concern as well. Dr. Dalski asked those in attendance for suggestions on how to deal with that. Steve suggested adding an additional member from hospital position for BBC and Oaklawn and an alternate medical director/ER from Oaklawn. Dr. Dalski stated if this is the route we will be taking, we will need a bylaw change to make the change of board composition. This will become a discussion item for the first quarterly meeting in 2023. First will be the change in bylaws followed by a vote for board composition. In our particular situation because we do not have a quorum today, not sure we can even make this recommendation, but we can make a recommendation at the first quarterly meeting of 2023 and vote at the April 2023 meeting. This is the best we can do at this point. A written summary of the phone conversation is displayed below for reference purposes.

From: Kuhl, Kristine (DHHS-Contractor) < KuhlK2@michigan.gov>

Sent: Monday, September 26, 2022 2:38 PM **To:** Chet L Dalski < <u>dalskic@kellogg.edu</u>>

Cc: swiderskimd@gmail.com

Subject: Calhoun County Medical Control Authority Board - Composition

As mentioned in our conversation earlier today, the CCMCA doesn't meet statutory requirements for the medical control board composition. It has 6 hospital representatives and 7 non-hospital representatives.

Section 1.3 Number and Selection of Directors



The board of Directors shall consist of thirteen (13) persons as follows: one (1) licensed emergency department physician who shall serve in the capacity of Medical Director as appointed by the Board of Directors of CCMCA; two (2) hospital administrators (one each from Bronson Battle Creek (BBC) and Oaklawn); two (2) hospital emergency department nursing administrators (one each from BBC and Oaklawn); three (3) ambulance provider representatives (one each from Albion Community Ambulance, LifeCare Ambulance, and Marshall Area Firefighters Ambulance Authority.); two (2) representatives from agencies that provide Medical First Response within the County (designated by the Calhoun County Fire Chiefs Association, positions to represent urban/suburban and the rural settings); one (1) EMS training representative from Kellogg Community College; one (1) administrator from Calhoun County Central Dispatch; One (1) licensed emergency department physician who shall serve in the capacity of Assistant Medical Director (preferred from a different Calhoun County hospital than the Medical Director).

Administrative Rule: Emergency Medical Services-Life Support Agencies and Medical Control R 325.22202 (b)

Appoint a medical control authority board, as defined in these rules, to administer the medical control authority. The majority of the board shall be comprised, at a minimum, of members of the hospitals and, when applicable, freestanding surgical outpatient facilities. The board may include representation of life support agencies.

We've found the board composition off frequently when the advisory board is combined with the medical control authority board. It most certainly can be done, but the MCA board still needs to meet the requirement of hospital majority.

Also of note: In the bylaws Section 2.3 Duties (D.) last paragraph

The alternate Medical Director shall act in the absence of the Medical Director in all capacities. The Assistant Medical Director may only vote on Executive Committee matters in the absence of the Medical Director.

If the alternate Medical Director remains as one of the hospital representatives on the board but can NOT vote, I will have to consult with the director or legal to find out how this impacts hospital majority as described in rules. Neither the statute nor the rules acknowledge non-voting members of the MCA board.

Thanks,

-Krisv Kuhl

Krístíne Kuhl

Kristine Kuhl, Paramedic, I/C, BA, MA
Medical Control Authority Coordinator
Community Integrated Paramedicine Coordinator
Division of EMS and Trauma
Bureau of EMS, Trauma and Preparedness
Michigan Department of Health and Human Services
1001 Terminal Road
PO Box 30207
Lansing, MI 48909

Mobile/Cell: 517-582-5155

NOTE My office phone number is being retired on June 24th. Please utilize my cell number and I am happy to receive text messages.

Division of EMS and Trauma Mission Statement:

To support the Michigan EMS System in protecting the public health and providing safe and effective patient care.

Confidentiality Notice: This message, including any attachments is intended solely for the use of the named recipient(s) and may contain confidential and/or privileged information. Any unauthorized review, use, disclosure, or distribution of this communication(s) is expressly prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy any and all copies of the original message.

Chet mentions, this is a carryover item from the October 3, 2022, meeting and is still work in progress and have no new updates to report.

New Business:

PSRO Meeting Update – Dr. Swiderski

We continue to remain a work in progress on the process of the review protocols. It looks like we may have until the end of the year to approve.

Dr. Swiderski advised that after receiving survey poll results—announcement of the PSRO meetings to be held the second Monday of even months 2:30-4:00 PM. Steve mentioned we have not met in person for over a year for these meetings and would like to encourage meeting face-to-face. Clark together with a few other attendees also encourage a face-to-face meetings. This would enable everyone to respond when reviewing documents and not having to share a screen of the document as everyone will have control of their paper document and be able to jump around the protocol with questions for different reasons from everyone. No final conclusion on face-to-face meeting or continuation of virtual meeting platform.

Establish 2023 Meeting Dates - Dorothy Malcolm

Since our Monday 9-11 AM meeting date/time does not work for our hospital representatives, let's send out a poll to establish a better date/time for everyone to meet and assemble a quorum as set by our Bylaws. Theresa responded that Tuesday, 11 AM-1 PM work for her and her hospital representatives. Dorothy has requested Mary Louise to send out a survey poll. Dorothy has requested Theresa Dawson (CCMCA Executive Board Hospital Administrators) to assist her to co-chair the 2023 meeting dates schedule upon receiving the survey poll results for the remaining quarterly meetings for 2023.

Another inquisition was also brought up by Theresa Dawson as to establish an electronic vote procedure with a virtual platform meeting. Unfortunately, Chet and Steve investigated this matter and since the CCMCA is considered a government entity which follows the guidelines of government entities and the Open Meetings Act does not allow for electronic votes. Dorothy will dig deeper into Theresa's request which if permitted will require a change in our bylaws. Steve mentioned that if this would be allowed, we do a follow-up confirmation of the electronic vote result at the next quarterly meeting with the consensus we have a quorum. Theresa expressed a "thank you" for the clarification and the work involved in the information provided by Steve and Chet.

Other Notifications and Comments - Dorothy Malcolm

a) Sidenote Update — Chet stated that as it stands currently, this is my last CCMCA meeting due to retirement from Kellogg Community College. The college administration has not fully committed to allow Clark Imus to take over Chet's responsibilities with the CCMCA involvement. Please wait for a response from Kellogg Community College with this possible rollover of duties with the CCMCA.

- b) Board Composition Dorothy reiterated we need a more vigorous participation with hospital involvement moving forward. If there are new alternate representatives to be assigned/named to the CCMCA Board representation, kindly submit on letterhead the appointment of the individual(s) that have been selected by the CEO/President of the organization whom they represent to the Secretary/Treasurer of the CCMCA Board, currently Chet Dalski at Kellogg Community College (dalskic@kellogg.edu) or his successor.
- c) Retirement Gratitude Dorothy affirmed on her behalf and on behalf of the entire CCMCA Board and its representation of Chet's commitment and service to our CCMCA Board since its establishment and involvement with Kellogg Community College as of 1988. It was noted that Chet and Steve Frisbie have been with the MCA since 1984. *Congratulations Chet!*

Next Meeting Date – Dorothy Malcolm

Date to be determined for the April 2023 quarterly meeting. Stay tuned for further communication.

Adjournment – Dorothy Malcolm

Motion to adjourn made by Nick and supported by Steve. The meeting concluded at 12:03 PM.

CD:CI/mls