

SHEBOYGAN COUNTY EMERGENCY MEDICAL SERVICE COUNCIL MINUTES

Sheboygan County Sheriff's Department
Conference Room
525 N 6th Street, Sheboygan, Wisconsin 53081

May 18, 2016

Called to Order: 6:02 PM

Adjourned: 7:31 PM

MEMBERS PRESENT

NAME:

Dr. Suzanne Martens
Steve Steinhardt
Tom Bahr
Denis Fellows
Darrel Kasuboski
Stephen Cobb
Rosemarie Trester
Julia Nash
Chuck Butler
Blaine Werner
Craig Schicker
Shalon Edson
Brian Goelzer
Allen Wrubbel
Vernon Koch
Steven Zils
Robert Kulhanek

REPRESENTING:

Sheboygan County Medical Society
Emergency Government
Member at Large/St. Nicholas
County Fire Chiefs
First Responders
Sheboygan Police Department
City Government
Sheboygan County Sheriff's Department
Sheboygan Fire Department
Random Lake Fire Dept/Rescue Services
Aurora Sheboygan Memorial Center
St. Nicholas Hospital Administration
Private Ambulance Services
Village Government
County Board
Sheboygan County Medical Society
Consumers Interested

MEMBERS ABSENT

NAME:

Joel Urmanski

REPRESENTING:

County Bar Association

ALSO PRESENT

NAME:

Michael Brungraber
Terrance Cram
Brent Multer
DiAnna DuPuis

REPRESENTING:

Town of Sheboygan Fire (RTF)
Sheboygan Sheriff (RTF)
Sheboygan Sheriff (RTF)
Emergency Govt/Sheboygan Sheriff

CALL TO ORDER AND INTRODUCTIONS

Dr. Martens called the meeting to order at 6:02 p.m.

Introductions were made which included Rosemarie Trester who is the new City Government representative and members of the Rescue Task Force (RTF).

PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was recited by all persons in attendance.

CERTIFICATION OF COMPLIANCE WITH WISCONSIN OPEN MEETING LAW

Steve Steinhardt stated we are in compliance with the Wisconsin Open Meeting Law. It was posted Monday, May 16, 2016 at 2:00 p.m.

APPROVAL OF MINUTES FROM PREVIOUS MEETING

The Election of Officers paragraph will be amended. Motion by Steve Steinhardt and Seconded by Tom Bahr to approve the minutes as amended from the February 17, 2016 meeting. Motion carried.

CORRESPONDENCE

Steve commented that Dan Hein who represented Town Government, has stepped down from the EMS Council due to a scheduling conflict and not being available for Wednesday night meetings. He pursued an alternate, Dirk Zylman from the Town of Mosel, however he is not running for re-election and declined. A good representative for townships is still needed and everyone was asked to inform Steve if they know of someone for this position.

Suzanne spoke with two of the Road America administrators this week who said they have reorganized some of their administrative people and will be completing their first responder application with the new names and signature. They will then move forward contacting Plans and Goals to complete the process.

OLD BUSINESS UPDATES

COMBINED DISPATCH UPDATE

Captain Nash commented that the new county dispatch center is in the final stages and all is moving along well. IT has been working on loading the necessary programs onto the computers as well as testing the computers. The last of the cabling is being installed. There was a call placed today with representatives of Viper for the 911 system and training on that system will take place as early as the week of May 23rd. The Viper system will be installed and running before the radio system is on-line. The new county dispatch center is expected to be staffed and running by mid-July.

RADIO UPGRADE UPDATE AND TRAINING UPDATE

Steve commented that the installation of mobile radios started today, beginning with fire departments and alphabetically. The mobile radios being installed work on the existing system as well as the new system. They have been programmed with the existing template used currently. There has been "Just In Time" training via YouTube video which was sent as a stop-gap due to its being mainly on how to use the radio features, because the radio itself is going to operate in template fashion, exactly the same way it does now. George has been working at getting everything programmed. Baycom will do installations at the fire departments. The tower is up. The final training program is 90% complete and will be more of a policy and protocol training which will involve dispatch, fire, law and EMS. In mid-July, when dispatch is up and running is the same time the radios will go into operation.

ROAD AMERICA RESPONSE

Steve questioned what Road America will be doing now that they are developing a first responder agency, do they still want first responder coverage 24/7 with the campers and go-kart tracks at night, being their safety teams are not there? He had a brief discussion with Elkhart Lake first responders regarding if they are interested in providing this service at RA. However, dual coverage could lead to confusion. The new Road America First Responder Application will need to address this issue. The gate (i.e. mailbox) at Road America is in the Town of Rhine, but you go across the gate a short distance and you are in Plymouth which means they would be covering Plymouth and that is outside their jurisdiction and would call for an agreement between the village and town. Currently Orange Cross Ambulance is the first responder at Road America, unless other resources are requested. This is where we are at with Road America, they need to develop a first responder plan and in the process they will need to be asked whether or not they want 24/7 coverage which if so, the above issue will need to be addressed.

Steve stated that he will contact Road America and Elkhart Lake regarding their response to this issue. The Road America Safety Team First Responder Application will be on the agenda for the next meeting.

RESCUE TASK FORCE UPDATE

Michael Brungraber commented that the Rescue Task Force (RTF) has been training for a year now and a big training event is coming up this Saturday, May 21st, at the Howards Grove High School. This is a large scale mass casualty event where the RTF, law enforcement, EMS and local fire departments will participate. A good majority of the fundraising has been done, however, quite a bit more is still needed. The bag sets of equipment have been purchased and include about 50 MegaMovers, 200 tourniquets, as well as many other tactical medical items. An equipment bag was brought to the meeting tonight for the council to look over. He stated what RTF is looking to do is get activated through MABAS so everyone is covered by insurance. RTF has approximately 35 members that come from countywide agencies, i.e. first responders, fire fighters, law. There is a first responder element as well as an evacuation element. Minimal training for the evacuation team will be Self Aid/Buddy Aid, and the first responders will also go through the Self Aid/Buddy Aid training. The RTF is not meant to replace an agency, they augment on scene personnel by retrieving patients who would normally not receive medical attention until the threat was neutralized. RTF is escorted by law enforcement into a warm zone to start treating and evacuating patients so that local fire and EMS can work further on them or transport to a hospital. Michael commented on an active shooter mass casualty incident article in the May-June 2016 edition of EMS Professionals magazine.

Michael stated that the Rescue Task Force is looking at getting activated through dispatch through the all call and obtain a MABAS card similar to the dive support team. They are here tonight to get approval from the EMS Council so they can move forward. The goal is to be up and running as of June 1st, 2016.

Suzanne stated that the group is rather unique in its set up with 35 people from different agencies and that is why they originally proposed to report to this council, because then they would have the county oversight.

Steve commented that under MABAS, a single agency needs to belong to MABAS in order to engage in a MABAS call. Sheboygan County Rescue Task Force members are actually from a multitude of individual agencies who are still working for those agencies. Due to this, one organization is needed to sponsor the Rescue Task Force and since the Sheriff's Department is part of MABAS, the Sheriff has stated that it will be a Sheriff's Department MABAS card for the Rescue Task Force.

Sergeant Cram stated there are 12 equipment bags which will be stationed at three different locations throughout the county in volunteer fire departments. There hasn't been a final decision, but approval for bag placement has been given by the fire chiefs in Adell, Glenbeulah and Town of Sheboygan Falls. When the MABAS card is in effect and a call is paged out, it will say "Rescue Task Force, equipment from the following agencies" it will then list the three agencies "respond to the location with equipment". The RTF will have its own communication and staging people. The paging protocol would only include county jurisdiction and not the city, due to the city having their own protocols. The funding comes from donations that were solicited, about \$16,000 and approximately \$13,000 has been spent to get all the equipment for the 12 bags. He also requested that if anyone knows of additional resources for funding to let him know so he can pursue the lead. He stated that it is an on-going process with training and assembling a rescue task force and believes Sheboygan County is better prepared from just a

year ago. EMS and ambulance services have not been heard from regarding their level of interest with the RTF.

Steve stated that based on the structure, it was figured that everyone who is working in ambulance would actually handle the advanced medical care and transport of the patient.

Sgt. Cram stated the majority of RTF members are first responders. The group is split up between evacuation and RTF. The RTF people have to be first responder level and participate in the on-going training. If, for instance a fire fighter only has Self Aid/Buddy Aid training they are welcome to join the group, but their main duty would be the evacuation portion. This Saturday the active shooter mass casualty training at Howards Grove High School will be the first large scale training for the RTF.

Sgt. Cram stated that SOP's were provided to Dr. Martens. There is a little more work required, i.e. background checks and procedures regarding personnel which is agency policy and Dr. Martens does not need this documentation.

Suzanne will need to receive a group description and basic medical tenets in order to add it on to the county protocols, and it will have to go into the county plan as a new group. Suzanne stated she will need to translate some of the documents received by Sgt. Cram into protocol format.

Deputy Brent Multer stated that the active shooter mass casualty exercise this Saturday at Howards Grove High School will be an integrated law enforcement event which was initially designed to be law enforcement training for an active shooter scenario to maintain their ALERRT concept through Texas State University. It is also a command and control exercise to set up staging which they don't do normally, escorting the RTF is a new concept and to reinforce their Self Aid/Buddy Aid training. There will be 5 dispatchers, 25 officers consisting of multiple area agencies, fire departments, first responders, role players from the high school and LTC, and possibly from Sheboygan PD Explorers. There will be three different scenarios which are about 1 ½ hours each which includes a half hour debrief at the end of each scenario. Following the last scenario, a debrief on all three scenarios will be discussed. Due to communications not working through a repeated channel inside the school, a direct channel will be utilized and dispatch will not hear what is happening. Therefore, a person will be placed outside the school and will handle two radios, going back and forth between dispatch and officers inside. For each scenario, officers will be dispatched to the school and have to respond appropriately, enter the school, begin searching the school and then at some point there will be active shooting in the school and they will deal with that. Throughout the last two years, officers have been trained in medical treatment to stop the bleeding as much as possible with the equipment they carry, so that will be part of the exercise. They will have to coordinate with the RTF who will be outside and when it's "relatively safe" the RTF can enter the building, begin triage and evacuation. Each scenario will have between 10 and 20 casualties. Sheboygan Memorial and St. Nicholas hospitals are included as well, so several patients will be transported to each hospital for screenings. School district personnel and fire chiefs from other areas were interested and will participate in a Table Top exercise located in the library, where they will be discussing the scenario while the active shooter exercise is occurring. The media will be included as observer and with the attention from the press, hopefully some funding will result.

Suzanne asked if the general public will be able to come and watch the exercise. Brent stated that there is a list of observers, but it is not open to the general public. There will be a safety checkpoint, so if someone is genuinely interested and is law, fire, EMS or medical, they should

contact the department so they can be put on the list. The observers will receive an explanation as to what is happening.

Steve commented that a widespread invitation to the event was not intended. The Howards Grove School District is hosting the event and they are rightfully concerned for the welfare of the students and their image. Out of respect for that, the event must be focused and contained.

Sgt. Cram stated that they are doing fundraising with a brat stand at Holland Fest. The goal is for some day to be part of the budgeting process for sustainability. The generous donations received have given the RTF needed medical equipment. Rescue Task Force needs the EMS Council to understand their mission and support them so they are able to move forward, and welcomes any comments or suggestions.

Allen stated that for future funding, the RTF should present their mission at governmental meetings where the mayor and heads of municipalities are in attendance. He stated that Sgt. Cram should talk to the County Board Chairperson and request to be added on a meeting agenda.

Chuck commented that RTF may be growing larger than is necessary. The Rescue Task Force was a concept of grouping first responders with law enforcement to address the issues, not an opportunity to assemble another team that operates independently of everyone else. He stated that currently, he is not sure what would happen in the city if there was a need, stating he's seen this happen with the dive team. He understands the need to be prepared for this type of event, but thinks way too much is going into its becoming an organization. He believes what the rescue task force does should be a task within our normal operations. He thinks too much time and resources are being funneled into something that may or may not happen, and questions the sustainability of the group. He is in disagreement with the structure of giving the group its own name and organization rather than a concept within the agencies on how they would accomplish that type of call. He also believes this is not a role of the EMS council to oversee and run the RTF.

Steve commented that the flip side to having an organized group overseen by the council is to have each individual agency doing it themselves and then costs would grow exponentially.

Suzanne commented that each of the agencies has representation on the council, and we are supposed to be sharing information.

Steven Zils commented he doesn't know how the physical requirement of volunteers is addressed, but there are significant physical abilities required with evacuating 10 to 20 people from a school. He understands the volunteers have their set of skills, but not everyone is physically capable of that type of strenuous activity. He believes that is where volunteer agencies differ from a city agency, in how that is handled as well as the training that is involved when you have full time personnel. He agrees with Sgt. Cram that this is a new concept, having a volunteer RTF, and it will be interesting to see how it works. He mentioned listening to the radio calls side by side between law and fire in the Aurora, Colorado incident and that there was a lot of miscommunication. Historically fire doesn't go in unless the scene is totally safe and he thinks the mentality is starting to change and RTF's are helping to bridge that gap.

Michael commented that when the RTF was first started, Dr. Martens explained to the group that the public expectation to have this type of team is there, regardless if you have it or not. The city fire has a full time group who can address this need, but this doesn't include areas in

the county. It's been identified there is a gap, which is to get victims out of a warm zone, and the RTF has been organized to fill this need and expectation.

Brian recommended that when planning future exercises, he would like EMS transporting agencies to be more involved in the exercise.

Suzanne commented at the initial meeting she had told everyone that even if they are not an active member of the team, the Self Aid/Buddy Aid training associated with this is excellent and if nothing else, if everyone can attend the course and become familiar with bleeding control and airway management, a lot has been accomplished. The results of the exercise will be discussed at the next council meeting.

SHERIFF'S DEPARTMENT NARCAN UPDATE

Steven Zils commented that every law enforcement agency in the county are currently trained in the use of Narcan.

Steve commented on the issue that first responders are probably at the scene before the Sheriff's Department and for the most part they are not carrying Narcan. Captain of Patrol, Cory Roeseler, was trying to find a way for deputies, who will carry and are trained for it, can figure how to get the Narcan to first responders. Our kits could be on the ambulance and would be restocked by our department and then reimbursed by the first responder agency. At the last meeting Joel questioned whether this was discussed with corporate counsel. Capt. Roeseler stated that we do have the approval from corporate counsel; it's just a matter of whether or not the first responder agencies and ambulance services want to participate. Some sort of mechanism is needed for the exchange. Steve had a Narcan kit which consists of a nasal spray not an injection, and it was passed to all council members.

Cpt. Stephen Cobb stated their department has used a kit already, which happened to be approximately 8 hours after the officer had been trained in its use.

Suzanne stated that the emphasis behind the first responder/law enforcement Narcan kit use is for it to be delivered as early as possible and it is a nasal spray so no needles are involved.

Steve asked how to go about getting the Narcan kits to first responder agencies, would it take contacting each individual responder agency.

Suzanne stated that the first responders have to be trained in administering Narcan, it's in their protocols. She agreed that the Sheriff's Department would need to reach out to the first responder agencies to see if they want to participate. She had sent an email out to all EMS training officer contacts from each first responder agency and informed that this is moving forward, to look at your area and identify the need then get together with local law enforcement and discuss how this should be accomplished.

Steven Zils said that if the law enforcement agencies don't come to an understanding with the first responders, it can be purchased through Aurora.

NEW BUSINESS

NATIONAL EMS WEEK

Suzanne stated that this is the 42 Annual EMS Week. This actually is essentially the 50th Anniversary of EMS based on the original white paper, Accidental Death and Disability the Neglected Disease of Modern Society, which kicked off the awareness of death associated with motor vehicle and industrial accidents. She distributed the National EMS Memorial Service 2016

Honorees hand-out which is attached. The events happening for this year's celebration are the EMS Memorial Bike Ride and the National EMS Memorial Service for the 2016 inductees which will be held on Saturday and will culminate with the EMS Moment of Silence on Saturday night.

There are various other celebrations with barbecues and open houses, please attend one in the area and visit your responders. She will be assembling 30 treat buckets later this evening which will then be distributed.

Today is EMS for Children day, which is meant to focus on the awareness of pediatric needs in emergency medicine. Yesterday an awards ceremony was held at Orange Cross, EMS for Children Wisconsin has awarded Orange Cross with a Pediatric Champions Award. They were given an award plaque and picture along with comfort kits (pediatric distraction tools). EMS for Children Wisconsin Chapter was impressed with our dedication to pediatric training and care, our specialty equipment and the performance that was on the professionalism that was shown during the Sheboygan Falls fire.

DISCUSS POSSIBLE REPLACEMENTS TO FILL REPRESENTATION FROM TOWNS

Steve reached out to Greg Merten in Johnsonville but has not heard back as yet. He is also trying to contact Phil Van Ess, who was at Johnsonville but currently is in the safety department at Sargento Foods.

Blaine mentioned the Town of Scott has a first responder on the town board who may have a person of interest to contact.

EMS QUALITY ASSURANCE SUBCOMMITTEE REPORT

Suzanne commented the meeting was not held, but she has some Q & A results and distributed a hand-out of statistics from the EMS Annual Report. In 2015, she has identified 12,078 unit calls, so if two ambulances and a first responder get called out that would actually be three responses. Of the 12,078 calls, there were at least 80 codes in the county. The fire department had about 35 cardiac arrests in 2015 which has stayed the same. As far as distribution, our total provider volume is down to 373 bodies in various positions, per usual, about 65% of that is volunteers. There were specific questions on recruitment and retention, and whether or not agencies were able to evaluate their response times. The handout on response times is attached to this report. Some agencies are moving to either initiate a point with a point in pay system or a call per response payment system. Some agencies, ambulance and first responders, are able to calculate their response times and the calculation is based on the calls that qualify. The calls don't actually reflect their total run volume, but this is calculated on just the ones we have records on. The reason for printing is to see if the goal to respond to someone who is not breathing nor has a pulse is to get there within 5 minutes; it's very unlikely this will actually happen. The average response time is not close to 5 minutes. The 90% fractal response time (90% of calls you can respond within that time) is well into the double digits. This is the reason for needing EMD.

Steve, you said you were sending a text at the moment to address Blaine's request. Blaine asked about getting a "pre-alert" for EMS, i.e. "attention random lake ambulance" (a call pending). I have no idea what this is about.

EMS LEGISLATIVE SUBCOMMITTEE REPORT

Joel Urmanski is not in attendance tonight.

REPORT ON SHEBOYGAN COUNTY EMS ASSOCIATION MEETING OF MAY 2016

Suzanne stated that the County EMS Association met last week. They were made aware of the Narcan plan in the works. The active shooter drill at Howards Grove was announced. It was also discussed with Chief Butler regarding a shared bariatric plan regarding an extraction of someone with special needs. First responder liaisons were introduced Orange Cross has assigned, which is basically a liaison to a first responder unit where they act as a point person as well as a training assistant. Upcoming training choices were discussed. The First Responder Staffing Bill was passed which was to add a first responder as an EMT substitute within ambulance staffing. She updated that the state has recognized there are some skills then that the first responder will have to assist the EMT with and the one identified was physical restraints. It was identified that application of physical restraints is at least a 2, if not a 5, person task which is the recommendation for taking someone down safely. So, that would also be identified as an advanced skill for the first responders.

PUBLIC COMMENT

Chuck commented that a formal request with an explanation and rational for the bariatric system was sent to the two hospital foundations. A denial from St. Nicholas foundation was received stating that they only fund internal projects. They are still waiting to hear from the Aurora foundation.

ADJOURNMENT

Tom Bahr moved to adjourn the meeting. Seconded by Steve Steinhardt. Motion carried. The meeting was adjourned at 7:31 p.m.

The next EMS Council meeting will be held on Wednesday, August 17, 2016, at 6:00 p.m. in the Conference Room at the Sheboygan County Sheriff's Department.

Respectfully submitted,

Steve Steinhardt,
Recording Secretary

National EMS Memorial Service 2016 Honorees

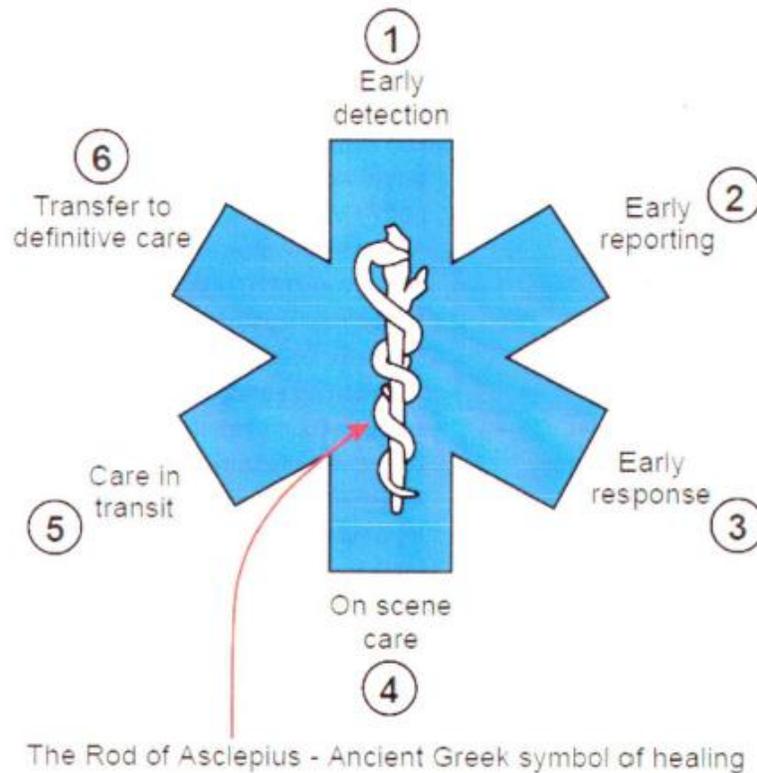
The National EMS Memorial Service has, since 1993, been honoring America's EMS providers who have given their lives in the line of duty. The National EMS Memorial Service and the National EMS Memorial Bike Ride will pay tribute to 32 fallen EMS and air medical providers from 15 states during the 2016 National EMS Weekend of Honor in Arlington, Va.



Michael F. Cavanagh	FDNY-EMS, NY
Francis Charles	FDNY-EMS, NY
Shane Michael Clifton	City of St. Paul Fire Department, MN
Luis de Peña Jr.	FDNY-EMS, NY
Chad Frary	Native Air, AZ
Thomas Giammarino	FDNY-EMS, NY
Thomas Fritz Hampl	American Ambulance / SkyLife Helicopter, CA
Daniel Hampton	City of Burnet Fire Department, TX
Stuart Hardy	Burton Fire Department, SC
Rick G. Hartley	Southeast Colorado Hospital Ambulance Service, CO
Kyle Juarez	American Ambulance / SkyLife Helicopter, CA
Kenneth Krulish	St. Johns County Fire Rescue, FL
Janice M. Keen-Livingston	West End Ambulance Service, PA
Marco Antonio Lopez	American Ambulance / SkyLife Helicopter, CA
John Mackey	Jessamine County EMS, KY
James V. Maguire IV	Hillsborough Rescue Squad, NJ
Patrick Edwin Mahany Jr.	Flight for Life-Colorado, CO
Matt Mathews	Eagle Med, OK
William Lawrence McKinney Jr.	Rockingham County EMS, NC
Kristin Elizabeth McLain	Travis County StarFlight, TX
Harold McNeil	FDNY-EMS, NY
Barry Garfield Miller	Bergen Fire Department Inc., NY
Douglas Mulholland	FDNY-EMS, NY
William C. Olsen	FDNY-EMS, NY
Linda Ohlson	FDNY-EMS, NY
Ralph E. Oswald	Hampton Bays Volunteer Ambulance Corps, NY
Hinal Patel	Spotswood Emergency Medical Services, NJ
Kenneth Duane Prunty	TriCommunity Ambulance, PA
Ronald Rector	ARCH Air Medical, MO
Tyrone Rogers	FDNY-EMS, NY
David Schneider	Native Air, AZ
Erik Park Steciak	Bel Air Volunteer Fire Company, MD

The Star of Life

Designed by Leo R. Schwartz, Chief of the EMS Branch, National Highway Traffic Safety Administration (NHTSA), the Star of Life was created after the American Red Cross complained in 1973 that the orange cross too closely resembled their logo, the red cross on a white background, its use restricted by the Geneva Conventions. The newly designed Star of Life was adapted from the Medical Identification Symbol of the American Medical Association.



The snake emblem is the Rod of Asclepius, widely used as the symbol of medical care worldwide. There are several theories as to its development. It is named for the Greek mythological figure Asclepius, who was said to have possessed healing power. It is often incorrectly depicted as a Caduceus (a staff with two snakes and a pair of wings).

6 Points:

- Detection: The first rescuers on the scene observe the scene, understand the problem, identify the dangers to themselves and the others, and take appropriate measures to ensure their safety on the scene (environmental, electricity, chemicals, radiation, etc.).
- Reporting: The call for help is made and dispatch is connected with the victims, providing emergency medical dispatch.
- Response: The first rescuers provide first aid and immediate care to the extent of their capabilities.
- On scene care: The EMS personnel arrive and provide immediate care to the extent of their capabilities on-scene.
- Care in transit: The EMS personnel proceed to transfer the patient to a hospital via an ambulance or helicopter for specialized care. They provide medical care during the transportation.
- Transfer to definitive care: Appropriate specialized care is provided at the hospital.

Response Times:

Avg RT	90%RT	n
03:31:00	06:00:00	52
05:48:00	10:00:00	15
06:00:00	10:00:00	24
07:08:00	11:26:00	261
08:13:00	13:00:00	188
09:11:00	13:00:00	378
12:05:00	19:11:00	250

Recruitment and Retention:

100% Staffed	Recruit/Retent N/A	Paid on-call	Pay per call	Signing bonus	Educate reimbursement	Equip reimbursement	Length of service bonus	Other
1								
1								
1		1	1		1			
1			1		1		1	1
			1		1		1	
1					1			
0					1			1
1			1				1	1
1			1		1			
1	1							
1					1		1	
1	1							
1					1			
1		1			1			
1					1	1		
1					1			
1	1							
15								
83%								

Pay for on-call w/e staff only.
 moving to a paid system for EMS/FD
 points per drills and calls; points paid out by % at end of year