

**State Education and Training
November 18, 2014**

Present: Blair Balmforth, Nancy Brunet, David Burich, Ralf Coler, Donna Lillis, Rick Ortyl, Art Romano, Daniel Tauber, David Tauber, Michael Zacchera

Excused: Josh Beaulieu, Kevin Brown, Skip Gelati, Richard Sanders

Guests: David Bailey

Meeting called to order at 0940

Motion to approve October minutes by Mr. Romano, second by Ms. Lillis
No discussion ensued; approved without changes: passed unanimously

OEMS Update

Local EMS Plans being evaluated alphabetically
Health program assistant positions ready to be filled
MIH – preconference at Expo
 Looking at national speakers
Regional Coordinators' positions – no decision yet

Old Business

CSEMS-I: annual meeting and elections March 21st
Conference also being held at Mid-State Pomeroy Avenue 8-130
 Grant writing
 Electronics in Education

CEMSAB: SMR has been released
BLS 12 Lead and CCR being worked on
Ebola Response by EMS – follow CDC guidelines
Background checks – will be ongoing discussion
 Multiple variables need to be determined
AEMT – support CEMSMAC decision that AEMT must be to most
current Educational Standard and ALS PSA means Paramedic not AEMT
Mission Lifeline – in place in Hartford area. Looking to expand statewide
Fire rehab – has been reopened for discussion

CEMSMAC: Equipment list discussion
Ebola preparation
Regional updates
 Looking more at unified regional guidelines in Region IV

Transition Materials for Teaching: no report

PTPC: no report
Recently had begun looking at human intubation requirement

Regulations Review: through DPH
Anticipating Attorney General Office should return by Spring

NHTSA Recommendations: opinion and position of Committee has been submitted
will continue to monitor through other committees working

Discussion on EMT need for 10 patient contacts and “observation”
no longer being sufficient.

Medical Practices Act allows for PA and Paramedic Students to
practice without being licensed while in training. No provision
exists for EMT’s to have same contact in hospitals.

Statutory exemption needs to be considered for EMT students
functioning in hospitals as part of training program

New Business

Educational Packets for:

CCR - need to work on completing this next month

MOLST

BLS 12 Lead ECG

Ebola Update / PPE: Hartford Hospital had CDC consultative visit last week on integration of
pre-hospital to ED to inpatient area
Yale had CDC consultative visit on Wednesday. No report given.

Drills continue throughout agencies statewide

Nominations for Election of Officers:

Nomination by Daniel Tauber to maintain current officers

Second by Mr. Romano

No discussion

Motion to close nominations

Voting will take place at December 16th meeting at Hunter’s Ambulance.

Working Meeting Hour

BLS ECG Acquisition:

Education and Training needs to create competencies and objectives off of which to build
PowerPoint

12 Lead acquisition programs exist at ALS level

How can we adapt what exists to BLS agencies

BLS acquisition has expectation of transmission of 12 Leads

WCTHN used Tim Phalen program as basis for their Regional trial period
Mr. Balmforth has shared WCTHN / New Milford Hospital BLS 12 Lead Training program
New Hampshire also has state approved 12 Lead BLS program

Indications – need to include all ACS related content

Cognitive Objectives:

SWBAT

State five indications for acquisition / transmission of 12 lead ECG
Describe the procedure for acquisition of 12 lead
Describe four methods of improving the quality of ECG recordings
Discuss three situations and solutions for anatomical variations which may interfere with ECG lead placement
State the purpose of 12 Lead ECG acquisition in patients experiencing signs and symptoms of acute coronary syndrome.

Affective Objectives:

SWBAT

Acknowledge barriers to 12 lead acquisition
Appreciate the importance of 12 Lead ECG acquisitions in improving acute coronary syndrome systems of care.
Appreciate the importance of anatomically consistent 12 Lead ECG placement

Psychomotor Objectives:

SWBAT

Demonstrate proper lead placement on three simulated patients
Given a case scenario, be able to acquire a 12 Lead ECG and follow locally approved guideline to verbalize a destination decision
Given a case scenario, recognize and correct a circumstance which impedes quality ECG acquisition

Question for CEMSMAC – should educational agenda include expanded content to include major dysrhythmia recognition in all age group

Chair's Report

No report

Info Sharing

Course update posted on CORC website
EMS Expo May 27 – 30, 2015 at Mohegan Sun

Meeting adjourned at 11:30

Next meeting: December 16th at Hunter's Ambulance