

Plains to Peaks Medical Direction Committee

May 1, 2025

Summary Notes

Attendance:

| VOTING               |     | NON-VOTING         |     |
|----------------------|-----|--------------------|-----|
| Dr. Matt Angelidis   | Yes | Carrick Patterson  | Yes |
| Dr. Stein Bronsky    | Yes | Kim Schallenberger | Yes |
| Dr. Tim Hurtado      | Yes | Dr. Kash Kaul      | Yes |
| Dr. Eric Wu          | Yes | Jon Edon           | No  |
| Dr. David Hakkarinen | Yes | Kimberly Harreld   | No  |
| Dr. Jessica Walsh    | Yes | Kaylinn Hathaway   | No  |
| Dr. Bob Kelly        | No  | Aaron Williams     | Yes |
| Dr. Sean Keenan      | Yes | Caleb Hadfield     | Yes |
| Dr. Jeremy DeWall    | Yes | Mark Warth         | Yes |
|                      |     |                    |     |
| GUESTS:              |     |                    |     |
|                      |     |                    |     |

Review and approval of Meeting Minutes

- April 3, 2024
  - Motion to approve Stein Bronsky

OneDose App (Mark)

- RETAC live with the regional group.
  - Ft Carson Fire & Evans will be added soon.
  - Still looking to close gaps with other agencies.
  - Dr. Keenan states they love the new app. Unfortunately, the old guidelines were uploaded but they are working to get this corrected.
  - FD & AMR will go live after the contract is executed.
    - 2 days build out with new guidelines.
    - Training and education to the line via live or recorded.

Whole Blood Updates (Matt)

- Fundraiser was successful, also raised money from the El Paso Medical Society.

Whole Blood UPRAD (Sean)

- Plan to go live Memorial Day weekend with UPRHSD in Teller County.
- Fundraiser was successful raising \$125k to roll out and secure funding for the next 3 years.
- Using the same equipment at CSFD.

- UPRAD Lieutenants will be attending the training on May 5<sup>th</sup> at the Medical Division.
- Healthcare Coalition grant will help fund a course being offered by UPRAD mid June. This 6 hour course will help Medical Directors and other counties familiarize themselves with blood products. This will also be used as a train the trainer throughout the state.
  - Currently 16 slots are available at no cost.
    - Hands on training of tourniquet placement and wound packing.
  - Location and date will be determined.
    - Medical Division would be interested in hosting a course as well as providing additional SME's to help teach.
    - Fountain and Security also have good training rooms.
  - Medical Division has nonproprietary forms that will be available to UPRAD as long as the POWR logo with the rings is not used.
    - Mark will send Sean all Whole Blood forms.
    - UPRAD will develop their own logo.
- University of Colorado – Working on Department of Defense research grants. Has a team of EMS Doctors. Dr. Angelidis, and a doctor from UCHHealth North, and from CU.
  - Develop a validated database of a registry of patients on the prehospital side.
    - Common database to create patient outcomes in trauma and medical.
    - Intend to get funding to expand.
    - Questions can be dropped in for answers.
      - Ultrasounds for PEA, does that really make a difference?
- NCRSAS system for disasters & COTAC funded program for Colorado which is a tactical level used for firefighting and major events.
  - Putting in a grant to track blood units within rural and frontier areas where they have very limited blood supply.
    - Question regarding crossing agencies, how is this tracked in a RETAC area?
    - Limited supply in El Paso County and may be area to piggyback on what these agencies are doing.
    - Does Blood comm have the ability to expand since they work on a cellular network and have the ability to ping the blood.

#### AED Registry Update (Stein)

- No significant updates
- Currently have the full community assessment done.
  - Gives a roadmap and information to go to funders. Next push will be to pursue for profit groups for cooperate funding.

- Coordinate with Kate.
  - Kate Leatherby did present to Region IV and Teller EMS.
  - Get Kate connected with the Pikes Peak Fire Chiefs. She has many different versions and would be able to get it cut to about 15 minutes.
    - Connect with Chief DeLeon

#### M-0.5 Update (Stein)

- Waiting for PD to finalize their legislation and procedures.
- Regionally this is being used but not within Colorado Springs.

#### Plains to Peak RETAC update (Kim)

- RETAC is partnering with the MCI committee and with the South Central Healthcare Coalition.
  - MCI Symposium May 9<sup>th</sup> and 10<sup>th</sup> at Penrose. Greg Cassel, retired chief from Clark County in Nevada, will speak on the Mandalay Bay incident and PJ Johnson will speak on the Marshal fire and how they evacuated the hospital.
- RETAC is working with Ute Pass and will sponsor the Eve class being held at the AMR building May 19-23<sup>rd</sup>.

#### Pulsara Update – (Kim)

- Joint budget committee approved the funding through the 911 fund. This still has to be approved, the Governor has to sign it.
  - There has been a significant push from the Healthcare Coalition to get a letter writing campaign out to the governor. Even through the JVC approved it, he could say no.
    - RETAC is sending a letter.
    - Healthcare coalition came up with a template if the MDC wants to send a letter it would show good support.
    - Goes through the end of June.
    - RETAC will not pay anything further.

#### Region IV update (Carrick)

- Drill at St. Francis will get feedback after AAR.
  - According to St. Francis, everything went well with Pulsara, etc.

- Stood up the Neurovascular CQI group that will meet quarterly which was briefly discussed. This group will discuss what improvements can be made with patient outcomes.
- NDMS and RMOC energy coming in regarding standing up regional coordination of medical response and resources. With the MCI committee, RETAC, hospital evacuation group, hospital area command.
  - There have been a lot of siloed efforts identified in getting medical resources regionally to large events to be able to coordinate and use.
  - Physicians should be aware that there may be a push to start consolidating that effort to stand something up like an incident management team for the medical.
  - Figure out how tactically operations and logistically support an ECC and OEM.
  - Each agency may have their own protocols on how they would respond.
    - Mutual aid for Medical response. Each agency has their own MOU's which medical would be included in. (making medical it's own thing)
  - STRAC concept is exciting but funding is an issue.

#### 225 Task Force update

- Draft documents should be done by August for year 3, which is recruitment and retention.
- Next meeting will be in Durango May 21-22.
  - Meet with reservations and specifically look at EMS response.
- Year four of the project will look at sustainable funding options for EMTS system.

#### Joint Letter on items to include in Chapter II

- MDC will write a formal letter of support for acts allowed that are currently waived.
  - Mark will build a draft letter on the committee letterhead. Letter can be submitted after May 12<sup>th</sup> to see what else is submitted at this meeting.
- EMPAC meeting May 12<sup>th</sup>
  - EMPAC meeting minutes can be found on their website. Utilize to construct the letter so there are no duplications in subjects.

#### Community Mobile Integrated Health (DeWall)

- Reuben Farnsworth from Delta County is working on this with the State.
  - The Community Paramedic Bill in the Senate, first with the Health and Human Services committee, EMSAC was going to ask for amendments to clean up and ask for allowances for Community Paramedicine and mobile integrated health.

- Currently in the House Health and Human Services with no opposition. Both nurses and department are on board.
- Delegated authority can not be used in the bill.
- Delta County, Eagle County, UPRAD, and South Metro have work together to come up with proper verbiage for the bill.
  - “performed a medical act including administering medication or therapeutic and performed any procedure, diagnostic test, or medical intervention, which is part of a patient’s written or verbal care plan under the direction of the agency medical director and only after receiving appropriate training relative to the medical acts from the agency medical director of their designee”
- This was forwarded to branch director, Mike Bateman, and some policy individuals who seemed favorable to this.
- Send letter to EMPAC this month from Plains to Peaks to help open up the scope.
  - Currently Community Paramedics fall under Chapter II but also falls under the Community integrated healthcare services licensing rules. Make Chapter II vague and give medical directors more ability to do what needs to be done with Community Paramedicine.
- Stein states he is on board and following work that Jeremy has been doing.
  - This is one potential rule making change but there would be an associated CIHS rule change.
  - Once the House signs on the Community Paramedic bill, the CIHS rules will open overlapping the Chapter II rules.
    - Goal would be to get rid of the chart and have other level EMS providers to be able to function within a CIHS agency as long as they stay within their Chapter II scope.
  - It may be asked, at the EMPAC meeting, to start a community subcommittee or task force to review.
  - CIHS rule will also include education requirements.
    - Medical Director requirements – either EMS board certified or 2 years of Medical Direction of at least 400 hours per year in the previous 2 years. Only EM and EMS would be able to do a CIHS medical director.
    - This may be easier to stand up functioning programs in the rural areas.
  - There 18 CIHS agencies in Colorado
  - MDC agrees to write a letter. Stein will draft.
    - Officially signed and put in for May 12<sup>th</sup>.

#### Pulsara On-Call Calendar

- Call load in Teller County is approximately 1-2 per week.

- Medical Director is called or text.
  - Keenan is not on Pulsara
- Call load for Colorado Springs is 1-2 calls per shift.
- Keenan will get additional information about Teller County and if they would like to be added to the EKG consults for STEMI's

Adjournment