

1 **District of Columbia**  
2 **Emergency Medical Services**  
3 **Advisory Committee 2012-2014**  
4

5 **Inaugural Meeting**  
6

7 **Date/Time:** Tuesday, April 24, 2012 at 1230 hours

8 **Location:** The Wilson Building, Conference Room G-9

9 **Note:** 7 persons seated in the gallery when the meeting was called to order.  
10

11 I. The meeting called to order at 1237 hours.

12 II. Committee members signed in and registered with the Executive Office of the Mayor. 13 of  
13 16 committee members present. Dr. Joseph Wright, Dr. Michelle Carter, and Catherine Goss  
14 were absent.

15 III. Members of the Committee who were present were issued the Oath of Office by Ms.  
16 Mikelle L. DeVillier from the EOM Office of Boards and Commissions. Certification of  
17 Acceptance applications were certified by Ms. DeVillier.

18 IV. Introductions of Committee members and support staff complete at the request Chairwoman  
19 Lightfoot.

20 V. Opening Remarks made by Chairwoman Lightfoot.

21 VI. Review of the Emergency Medical Services Act of 2008. The Chair cited from Section 23 (beginning  
22 on page 15) with a discussion of the legislative Establishment and Role of the EMS Advisory Committee  
23 (EMSAC). Committee members asked to review the entire piece of legislation on their own.

24 VII. Open discussion by the Committee with topics of discussion entered by Dr. Strudwick, Dr. Sava,  
25 Mrs. Renshaw, and Mr. Lyons.

26 Dr. Strudwick reports the discussions within his department have the tone that the providers  
27 and nurses are excited that the EMSAC has been reconvened. There is a paraphrased apparent  
28 feeling "that their efforts will be represented once again."

29 Dr. Sava stated that he feels the entities have “drifted apart on educational matters” and there  
30 has been little collaboration of resources. He is looking forward to unifying the efforts.

31 Mrs. Renshaw presented several items for discussion and that she and the Citizen’s Federation  
32 are extremely happy the EMSAC has been reactivated.

33 A. She would like to see the D.C. Fire & EMS (DCFEMS) Department provide an  
34 updated report as to the progress the Department has made and sustained in response  
35 to the recommendations that came out of the Rosenbaum Commission.

36 B. A response from the DCFEMS Department that addresses data sharing specific to the  
37 outcomes of the Satisfaction Surveys that are sent to patients/clients in their Ambulance  
38 bill. She would also like to know what are the agency’s responses or remediation efforts  
39 or mechanisms when a report of poor or below expectation encounters are reported.

40 C. She would like to see a comprehensive, consolidated report from CM Mendelson and  
41 the Judiciary Committee regarding follow through on the establishment of Policies and  
42 Oversight specific to EMS.

43 D. She expressed a desire to explore the expansion of the EMSAC to include additional  
44 members. She specifically inquired about adding an additional representative from the  
45 EMS labor sector. She expressed a desire to investigate adding a representative from  
46 the International Association of Firefighters (IAFF) Local 36 to insure all sides of issues  
47 are presented.

48 Mr. Lyons reported that he agrees with Dr. Sava in that the relationships between the facilities  
49 and the department have “slipped” over the recent years. Paraphrased: With the disbanding  
50 of the Paramedic Review Board, the Medical Sub-committee, and the Trauma Sub-committee,  
51 the DCFEMS Department has become isolated and operates without sufficient outside oversight  
52 or collaboration. He is also recommending that the EMSAC evaluate the training specific to the  
53 special needs population such as pediatric, geriatric, and bariatric.

54 VIII. Keynote speaker: Chief Kenneth Ellerbe, Fire/EMS Chief of the DCFEMS Department. Chief Ellerbe  
55 presented a general overview of the Department and his philosophy. Committee members inquired  
56 about (1) funds committed to EMS Training, (2) Availability of Training, (3) training Initiatives, and (4) the  
57 process of how to “re-program” funds to invigorate EMS training.

58 Assistant Chief-Medical Director David Miramontes, MD , FACEP lead a presentation of the  
59 Department’s current array of response vehicles, responder information, and the 2010 and 2011  
60 Response and Transport data. DCFEMS furnished handouts with this data and a series of maps with very  
61 detailed and compressive response data based on Service Demand Zones (SDZ). Handouts were  
62 provided to all members. Those who were absent received them in a e-mail package.

63 IX. Open discussion among the committee members resumed. Several committee members expressed  
64 the desire to investigate public education campaigns regarding the use of ambulances and emergency

65 departments. A discussion about inordinately high use of ambulances in the District versus other  
66 comparable sized cities ensued.

67 Dr. Strudwick expressed support for a campaign of appropriate use of EMS and EDs as well as  
68 the DCFEMS seeking to maintain or increase the number of EMS transport units.

69 Mr. Lyons provided a brief summary of the DCFEMS Street Calls program and suggested  
70 exploring expansion of the program and enhancing its capacities.

71 Dr. Amy reported that the District DOH has moved to managing and regulating based on  
72 established and accepted national standards. The data supports that the rate of first time pass  
73 and the actual scores have increased since migrating to the National Registry of EMTs (NREMT)  
74 certification process.

75 Dr. Miramontes presented the revised DCFEMS EMS training concept versus the traditional  
76 NREMT process. He also introduced the enhanced scope of practice by DCFEMS Basic Life  
77 Support and Advance EMT skill level providers. Discussions of the "Omega" response lead to  
78 the actualization of high levels of risk by the agency.

79 The general question of the DCFEMS Department's priorities, needs, and funding was opened  
80 for discussion but tabled until a formulated response by the administration was ready for  
81 presentation.

82 X. A list of Action items was established.

83 A. Secure a list of any legislative actions regarding the delivery of EMS or regulating the DCFEMS  
84 Department are before Judiciary Committee or the Council. Action Officer: C. Lightfoot

85 B. Provide copies of DC DOH regulations and policies specific to EMS. Action Officer: Dr. B. Amy

86 C. Inquiry as to what the Metropolitan Washington Council of Governments (MWCOG) EMS  
87 Sub-committee is working on in support of regional EMS issues. Action Officer: DCFEMS  
88 Captain R. M. St. Laurent.

89 D. Establish an electronic "drop box or folder" within the District's EOM servers for use by the  
90 EMSAC members. Determine the feasibility of the establishing District Government e-mail  
91 accounts for EMSAC committee members who are not employees of the District. Can these  
92 accounts be established? Action Officer: DCFEMS Captain R.M. St. Laurent.

93 E. Provide an update on the DCFEMS Department's progress and maintenance on measures  
94 recommended by the EMS Commission. Action Officer: DCFEMS Captain R.M. St. Laurent.

95 F. Secure copies of the previous EMSAC By-Laws for adaptation by the present EMSAC. Action  
96 Officer: C. Lightfoot.

97 G. Secure a DCFEMS organization chart for review by the EMAC. Action Officer: DCFEMS  
98 Captain St. Laurent.

99 H. Secure a copy of the approved 2012 and proposed 2013 DCFEMS budget. Action Officer: C.  
100 Lightfoot.

101 I. Secure a fiscal impact study of the DCFEMS Department's transition to the Dual Role/Cross  
102 Trained and All-Hazards model. Action Officer: C. Lightfoot

103

104 XI. Open comments from the gallery.

105 A. Mr. Ed Smith, The President of the International Association of Firefighters Local 36- The  
106 District of Columbia Firefighter's Association, offered to be of assistance in providing  
107 information in support of the EMSAC's mission.

108 B. Dr. D. Milzman expressed his happiness about the EMSAC being reconvened. He also  
109 inquired as to how the D.C. Emergency Department Leader's Work Group would fit into the  
110 hierarchy of the EMSAC. Dr. Milzman also suggested exploring adding registered nurses to the  
111 EMSAC.

112 XII. Establishment of the EMSAC calendar and meeting location.

113 A. The Committee elected to meet monthly. Meetings will be held on the first Thursday of the  
114 Month from 1200 hours noon until 1400 hours. Lunch will not be served.

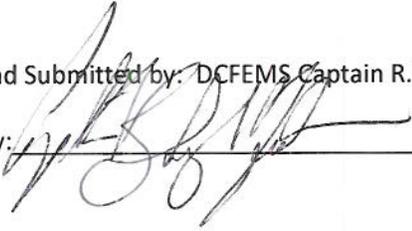
115 B. Dr. Amy offered to host the meeting in the 3<sup>rd</sup> floor conference room of the D.C. DOH  
116 Administrative offices located at the #55 'M' Street, SE. The committee accepted the offer of  
117 space. Audio-visual capabilities and the ability to record the meeting will be explored at the  
118 next meeting.

119 C. The next EMSAC meeting will be on Thursdays, May 3, 2012 at noon at the DOH  
120 Administrative Offices located on the 3<sup>rd</sup> floor of #55 "M" Street, SE.

121 XIII. A motion to adjourn was made and seconded. The motion was carried and the meeting adjourned  
122 at 1438 hours.

123

124 Recorded and Submitted by: DCFEMS Captain R.M. St. Laurent

125 Approved by:  Cynthiana Lightfoot, EMSAC Chairwoman