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Notes from the Director's Desk

My first day back full time was on 3/28/16

Over the last 6+ weeks, I have been on the other side receiving care. It was a very interesting and learning experience for me. As I went through my surgery, I wanted to receive exceptional, compassionate care. I know, from talking to another patient that had the same type of surgery as I, the experience I was going to go through was not exactly a good one. I found out why it hurt and was uncomfortable. What I needed (and wanted) was exceptional, compassionate care to help me through my surgery and recovery. I share this to lead into my opening topic.

When we take care of patients, we see them at their worst. We are called because they need help. Our goal should be to provide each one of our patients exceptional, compassionate care in the situation and environment both us, and the patient are in. It is a challenge, but in the end, if we give exceptional care and are compassionate we can walk away, saying we did our best for the patient. **That** is what CMH EMS is about.

Celebrate!! Our interdepartmental satisfaction score is **4.6** on a 5 scale. Our score was one of the top scores.

I recently attended at Webinar put on by the WPS/Government Health Administration about CMS (Medicare and Medicaid) regulation. This included clarification on needed documentation to help establish the level of care and necessity for the ambulance transport. Several items stood out that need to be included in **all** documentation, including **ALL** transfers. This is not all we need in your documentation, but we must make sure these items are included in our narrative.

1. What do you observe?
2. What is your complete assessment of the patient?
3. What is going on with the patient?
 - Transfers: What is the Dx?
 - Why was the patient in the hospital?
4. What, if any, treatment was done at the sending facility?
5. Changes after the treatment, if any?
6. How was the patient upon arrival? (CAO, unconscious, etc.)
7. What, if any, treatment was done during transport?
8. Changes after transport treatments, if any?
9. Details. Details. Details.

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I am continuing work a project on the appropriate use of ambulances for transfers. We conducted a 90 day review of transfers to LTCFs, SNFs, and Residential Care from CMH. We reviewed 154 transfers. 25% could have transported by other means. I will be addressing this in upcoming ambulance transfer meetings. However, 16 charts that were reviewed had poor documentation and we could not include them in the study. There was simply not enough information on those charts to make a decision on how to code them for us to get paid. Of the 154 charts reviewed, the documentation was on both ends of the spectrum: great to poor. Please, as you document, take your time and include details. With the change to ICD 10, we need to provide as many details as possible. Documentation that is detailed and more accurate enables our coders to better code our charts so we will get reimbursed. The more reimbursement we receive directly affects how financially stable we are as a department, and as an organization, which may make a huge difference in our financial success. With private pay, the more details we include, the more complete the record is and the greater the chance of successful reimbursement. All of these factors directly affects each and every one of us and our pay rate.

Your documentation is not only about coding and reimbursement. The chart you submit is a permanent medical record for that patient that you transported. It is a direct reflection on you as a EMS provider. If, for some reason, you are called to court, your chart is your documentation. Do you want the judge, jury, and people in the court room to see your chart? The answer should be yes. Each patient chart should be written as complete and detailed as possible, for the permanent record.

I want to thank all of the managers, as well as all of you that helped, while I was out. I greatly appreciate everyone stepping up and helping out, even if it wasn't convenient for you.

Be safe!

Neal Taylor A.A.S. EMT-P

Director, Emergency Medical Services

Upcoming Events for April

April 4th 9a-1200	Wilderness Medicine Competency	CMH EMS HQ Classroom A, Bolivar
April 6 th 830a	St. Clair County Staff Meeting	Osceola (St. Clair) Station
April 7th 9a-1200	Wilderness Medicine Competency	Ellett Memorial Hospital Classroom, Appleton City
April 7 th 830a-5p	PALS INITIAL Day 1	CMH Education (417) 328-6769
April 8 th 830a-5p	PALS INITIAL Day 2	CMH Education (417) 328-6769
April 12 th 830a-5p	ACLS Renewal	CMH Education (417) 328-6769
April 12 th 1p-5p	*Domestic Violence Training	McClelland Dining Hall, SBU
April 12th 630p-930p	Wilderness Medicine Competency	El Dorado Springs CMH Ambulance Station
April 13 th 8a-12p	*Domestic Violence Training	McClelland Dining Hall, SBU
April 14th 9a-1200	**Wilderness Medicine Competency	Hermitage CMH Ambulance Station
April 14 th 7p-9p	Lifeline Night Out Trauma CEU's	CMH Community Room 1
April 18 th 830a	Cedar County Staff Meeting	Stockton Station
April 20 th 830a-1230p	12-Lead ECG	CMH Education (417) 328-6769
April 21 st 830a	Cedar County Staff Meeting	Stockton Station
April 22 nd 8a-5p	***Spring Trauma Seminar	Lake Regional Hospital Conference Room B 3 rd Floor
April 28 th 9am	ITLS	CMH EMS HQ

* Contact Stacey Velez svelez@bolivarpolice.org or Danielle Conti danielle.conti@pchouseofhope.org to register

**In-House Makeup Date

*** Registration is required. To register, contact Marcia Whitter @ 573-348-8717 or mwhitter@lakeregional.com

Find additional training info at: <http://www.citizensmemorial.com/1calendar/index.html>

ALL COUNTY STAFF MEETING MAY 18th

Special Operations: Morgan Young

On March 9th, I attended education on what is called "the Chempack Stockpile." This is basically a stockpile of antidote for various nerve agents. An example of this is the insecticides used by local farmers. The Power Point slides that are linked at the bottom of my article specifically mention Tabun, Sarin, Soman, Cyclosarin, VX, VE, VG, and VM.

These stockpiles of antidotes are situated around the United States. Two of these stockpiles are located in Springfield. More are around the state as well as in Arkansas and Kansas. They are available on the request of the Incident Commander on the scene of an incident involving a nerve agent. The Missouri State Highway Patrol is responsible for bringing them to the scene as quickly as possible.

After attending the training, we attended a table top exercise to practice for this type of event.

I have included a link of where to find the power point of the training session I attended. I encourage all of you to review this power point. If you have any questions, I will be happy to attempt to answer them.

"F:\Depts\Pre-Hospital\FINAL-CHEMPACK Training-March2016.pptx" (in English: on the F Drive, in the Departs folder, the Prehospital folder, a power point slide named **FINAL-CHEMPACK** Training March 2016)

Be Careful,
Morgan Young, A.A.S. CCEMT-P I/C
EMS Special Operations Coordinator

Aaron Weaver Receives Patriot Award

Congratulations to **Aaron Weaver**, Pre-Hospital Operations Manager at CMH, for receiving the "Patriot Award" on March 3 from the Employer Support of the Guard & Reserve (ESGR), an agency of the Department of Defense. He was nominated for being highly supportive of the military reserve component members and their families by **Jason Stroud**, EMT at CMH.



★ ★ ★ ★ ★ ★ ★ ★ ★ ★

Congratulations
Years of Service

KELLIE BURNS 20 YRS!

CODY LICCARDI 2 YRS
AMBER GUST 2 YRS

★ ★ ★ ★ ★ ★ ★ ★ ★ ★

Happy Birthday!

Mike Minter	April 2nd
Jennifer Smiley	April 13th
Brice Flynn	April 17th
Jennifer Marsch	April 19th
Chris Mumm	April 26th

Hickory County Chatter: Alice Roberts

I am so proud of each of you for seeing the need the past month in helping keep shifts covered while we have been dealing with illness and family emergencies on such short notice in Hickory Co. I can't begin to say how much I appreciate each one of you for stepping up and in another's time of need. I am hoping all the sickness is behind us as we move forward going into the spring and summer months.

I have also appreciated the help from the other county stations as well, who are doing their best in keeping their open shifts covered in house as they arise.

STANDBY'S:

2016 standbys are starting to trickle in. Lucas Oil is almost every weekend for the next 6 to 7 months. We ask that every employee work at least one of the Lucas Oil Standby's so as not to cause a handful of employees from having to cover all of these events. I am trying to not lock this into a particular station per weekend, so we can keep some flexibility, and I can match up two employees that can meet easier at either the Polk or Hickory Station for their back up truck. I will be keeping track of who covers these events and who has not. Our first weekend, I had 10 EMT's put in for the standby's and I had to start somewhere on the coverage. Either you or your station's turn is coming.

VACATIONS:

I would like to touch base on scheduling and vacations. I have had to reject multiple vacation request due to already having too many employees requested off work. We also still have 7 employees working on finishing up mandatory PTO usage for 2015. Please look at the vacation schedule that is posted (all managers have access to this) prior to turning your request off in. We currently are only allowing one Medic and two EMT's off work at the same time with a day or two overlap.

We are changing the way we approve request off until further notice. Those who still have mandatory PTO to be used will be approved prior to those who have already used or already requested off up to their mandatory PTO for the year. This will allow EVERY employee to try and get some time off this year and the mandatory at least used. I am holding several request off for later this fall prior to approving in hopes that those who are in paramedic class will be licensed and be in a scheduled position. So, if you have a request in for this fall and have not seen where it is approved. that is the reason why. It will be showing on the vacation calendar, but you will see that it states "Not approved yet." There are very few spots left open for approval from now until the end of July. We still have a lot of places from August until December 31st where you can request off.

For those who turn in a request off that have already used or the projected use of their mandatory PTO for the year, I will be holding your request off until the week the schedule comes out. If NO ONE else has requested off for that time frame who needs to use PTO, I will then approve it.

If you have a request off that is denied and you are upset, please discuss this with your manager.

I GREATLY appreciate every one that I am seeing picking up shifts and putting in massive amounts of hours every pay period and trying to help keep our service areas covered. You are showing what GREAT teamwork is all about. Kuddo's to each of you!!!!

Schedule Information!

New Schedule Published: April 1st

PTO Requests May 22nd to December 31st: Please review the Google vacation schedule prior to submitting your request off!!

Polk County News: Aaron Weaver

Spring has sprung, flowers blooming, grass growing, and conditions for severe weather are upon us. What do we do in case of a tornado? It sounds pretty bad but, we leave our station.

Let me explain further. If we have a tornado warning or confirmed tornado on the ground that will be tracking through Bolivar, we get into our assigned truck and get out of our building. We do not want our ambulances stuck in a building under debris when people need help. We send units north and south. This gets us away from the path of the tornado. Then, when coming back to the city, we have at least one ambulance on both ends of the destruction. If severe weather is eminent, monitor the local weather channels for updates. There are several applications you can download to keep up to date on severe weather.

We have been reviewing charts for routine transfers returning patients back to skilled nursing facilities. We need everyone's help to improve our charting on these transfers. There are several things that we can put in the documentation that will help us be able to review the charts better. We are reviewing these charts to see if there was a medical necessity. What we need:

- * Is the patient ambulatory?
- * How did you find the patient?
 - o Sitting in wheel chair, on edge of the bed, lying in bed (what position), etc,
- * Is the patient Conscious Alert Oriented?
- * If they are on oxygen, did you put it in the flow chart?
- * Explain in your narrative:
 - o Primary Care Physician
 - o ER Physician or Attending Physician
 - o Discharge Diagnosis
 - o The medical need for the ambulance
 - o How did the patient get to your cot? By whom?
 - o Where did you leave the patient?
 - In a wheel chair, in a chair, in the bed (in what position), etc.

I would like to thank the operations managers from all of the counties for coming in and working shifts here in Polk County. It has really helped everyone out. Steve Keller, thank you for picking up some over night shifts.

In our staff meeting, we talked about getting the trucks standardized. We are moving closer to that goal. Amanda has been here in Polk County and she is helping us make an inventory list for each truck. We also have been getting the compartments lettered like the majority of the other trucks in our EMS Fleet. We are still a little way out from getting it all done but I wanted to let you all know we are a little closer to getting it completed.

Aaron Weaver, Paramedic
Operations Manager - Polk County

Health & Fitness: Brice Flynn

April is upon us, and more information about the CMH EMS health and fitness program will be coming out with the next competency. Details are being finalized with the CMH PT department. Look forward to the opportunities to become stronger and healthier.

Brice Flynn
NRP, AAS, BA

Cedar County News: Tom Ryan

Life and Times of Beautiful Stockton Lake

Spring has sprung! What should we start thinking about? No, not swimming, scuba diving, fishing, laying on the beach, but what comes out during the spring! Snakes, ticks, poison ivy, boating accidents, and people doing more and more outside. **Doesn't it seem just like yesterday we were wondering how to treat hypothermia patients and staying warm.** Where has the time gone?

Cedar County Ambulances: 710 and 715 are both back from Columbia and operational. Well, we are still trying to keep Morgan cool in the back of 715 so that issue we continue to work to correct. Keep your fingers crossed!

Outstanding Round trip transfer: Thank you: Bill Walker and Mike Minter for taking time out of your busy schedule to take a patient to KC during your day off. Also, thanks to Jay Fry and Missi Painter to come in and do a round trip transfer to Joplin. Thanks folks for helping our citizens in our community.

STEMI Recognition for March: Big thanks to Sheila D. & and Cheryl A., and Sheila D. & Jennifer M. for their outstanding work in recognizing their patient was having a STEMI and delivering to CMH Cath Lab quickly. ***GREAT JOB ladies!***

Cedar County Board Meeting: What's going on in Cedar County? Well, Cedar County Board didn't have a meeting this month due to lack of a quorum. So, maybe next month. Equipment we are looking at obtaining getting this year includes 2 Lucas CPR units, 2 vents, 8 auto inflate life vests, 3 suction units and a few other items we have on our "want list" if and when we have a board meeting that takes place.

Finally, a couple notes related to Operations: Remember, when responding to either LTHF or clinics:

-  Rule #1 - the patient is always right!
-  Rule #2 - refer to rule #1.

OK Folks, it's not our place to question when a Doctor has set up/scheduled/called in advance a transport of a patient to a hospital. Sometimes, we might not like the fact that we are bypassing CMH and going to another hospital farther away, but the Doctor and staff have already had this conversation with the family and/or patient and have chosen the receiving destination for a reason. It is not our place to stand and argue with the Doctor and staff! If we have a problem with the call, email your Ops Mgr and we will look into it and follow the proper chain of command. DO NOT argue with the staff in front of the patient asking WHY, WHY, WHY.

Also, when responding to patient's home, remember we are not their keeper or dictate their life style. We might not agree with the situation (like an Asthma patient with family members present and smoking or pets in the home.) **Remember, "IT'S NOT OUR LIFE."** They called us to come take care of their love one (or themselves) and not to get a lecture about life styles. Show our CMH Core Values and smile and be HAPPY!

Thanks for all you do! Watch your back, your partners back and be safe.

Tom Ryan, Paramedic
Operations Manager Cedar County



HealthEMS: Tom Liberty

The new Blood Glucose Flex field rolled out on March 17th. It looks like everyone is able to fill out the flex field without any problems! Thank you. Please remember: We are not to document the blood glucose in the vital sign area.

The management team will be meeting to try and make it easier for crews to mark the correct option when flying out patients. This may change to where other flex fields pop up. We will know more shortly after the first of the month. An e-mail will be sent out before the changes are made to HealthEMS.

If you do not have e-mails about returned trip tickets coming to your CMH e-mail, please log into the HealthEMS website and check for e-mails. If you want to have your HealthEMS e-mail sent to your CMH e-mail, let me know and I will help you get that set up.

If you get a trip ticket returned to you and did not receive an e-mail, go to HealthEMS website and look for a message. If you still do not have a message there, contact your station manager or myself and we will try and find out why it was sent back.

Tom L.

St. Clair County/Osceola: Don Stockton

Greetings from the Northern Territories!

We are pleased to report that snagging season has been less eventful than anticipated (knock on wood) and things in general are going well. Easter weekend is upon us and the blooming redbuds and assorted other trees, bushes and flowers promise that Spring really is just around the corner. This typically ushers in the beginning of the increased weekend traffic and population that will carry through until the public schools dismiss for the summer and the real invasion begins

As EMS professionals, we need to balance our own Spring and Summer anticipation with our obligation to operate the ambulances safely. Driving safety should always be our main consideration when driving regardless of the situation. Getting to the scene with an intact and functional truck, transporting our patient to their destination safely with the truck, and crew remaining in intact and functional, is the ultimate goal. Distracted driving, with or without a patient onboard, is unacceptable! You are responsible for your safety and your partner's safety as well as the safety of the countless vehicles and pedestrians you encounter during your shift. Be vigilant and be aware that distracted drivers are everywhere and the excitement of the changing seasons, etc. only increases the risk. Two hands on the wheel and constantly scanning your mirrors and the big, front view are keys to avoiding potential problems and accidents. If you are running hot to a scene, the passenger/navigator takes on an even more important role in scanning the environment for potential hazards. Don't rely on the lights and sirens to clear the path you want to take! Distracted drivers may not hear you or see you and many of them will never be aware of the fact that ambulance passed them on the road.

Think safety. Drive safely and use proper technique when lifting and walking so that you go home at the end of your shift in one piece. I preach this to everyone that runs with me; my first priority always is that I am going home to my family at the end of the day. My partner's safety is my second concern and everything else comes last.

Be safe out there!

Don

Education/Clinical: Theron Becker

Upcoming competencies:

Our next competencies start the first week of April. We have some guest instructors that professionally teach a Wilderness Medicine course throughout the US. Dates, times, and locations:

Mon, Apr 4th at 9 am in Bolivar.

Thu, Apr 7th at 9 am in Appleton City.

Tue, Apr 12th at 6:30 pm in El Dorado Springs.

Update on digital radio project:

Ugh. Another delay having to wait on the Cedar County Ambulance Board. They didn't have a quorum, so we are going to have to wait another month to have them approve the new location for the Stockton repeater. Once that approval is done, we can apply for frequencies at the FCC, then start installing equipment. The El Dorado Springs site is pretty much ready to go.

As we get ready to turn these new features on, there is going to be some technology and procedure changes for all counties and dispatch centers. Knowing which ambulances are in service and who is the crewmembers on those ambulances is going to be critical. Carrying the correct radio that is assigned to your shift is also critical. Before we are live, we will develop a HealthStreams training on using the new system. So, look for that in the next month or so.

ATTENTION PARAMEDICS AND PARAMEDIC STUDENTS:

Intubations in surgery depts:

As part of ensuring RSI competence, we expect each paramedic to complete two intubations in a learning environment each year. I've updated the form to include floor plans and step-by-step instructions on who to call, where to go, how to dress, etc. It's a little intimidating before you go, but once you are there, the CRNA's are very friendly and will make sure you are successful and improve your skills. The deadline to complete your intubations is your birthday. So, if you've already had a birthday this year and not completed intubations, you are behind. Contact a supervisor or check your email for the form that will help you.

Theron Becker
EMS Clinical Officer

CMH Emergency Medical Services Training Library

After moving into our new space and acquiring a retired ambulance, CMH EMS is making available our training library and equipment for use by employees, first responders, and friends.

We are adding to our list and upgrading our services, so look for improvements as we grow. Or if you have books or equipment you would like made available for use by others, we would be happy to include them.

The card catalog can be searched online (<https://goo.gl/m6ERps>).

Please see the email from Theron with the flyer attached.

Contact Theron Becker for more information, to check out a book, or request training materials:

theron.becker@citizensmemorial.com