

**Confidential Peer Review Information****Minutes QI Committee Meeting 08/24/05 @08:00 hrs.**

@408 E. Marion St., Shelby, NC

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**Personnel Present:**

Andy Haskins

Shelia Newport

Louis Jenkins

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**Meeting was Called to Order:**

Meeting was called to order by the new chairman, Andy Haskins. Only three persons attended the meeting, possibly because of the meeting date change.

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**Approval of Minutes from the Previous Meeting:**

Previous meeting minutes were reviewed and approved with one spelling correction.

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**Old Business:**

A policy/procedure for at home vent support patients was presented to the committee in draft form. It is attached in Word format. Suggestions and comments are requested for its final edition.

The protocol for Bites and Envenomations was presented in its final form. If an extremity is affected it should now “be placed in neutral position level with the heart.”

The PCR program has now gone on line.

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**New Business:**

Alan Wacaster is now A-shift FTO. FTOs are automatic members of the QI Committee and the SCTP team.

The Sheriff’s Dept. has contacted Joe Lord requesting that the Deceased Subject protocol be re-written. Mr. Lord is coordinating with concerned departments and personnel for proposed changes.

Transport of newborn infants to appropriate facilities was briefly discussed. This question arose from a call that involved the transport of a neonatal patient with a low five minute APGAR score to KMH. Is it more appropriate to transport a compromised infant to a more distant facility, or to a much closer ED facility with an MD on duty? It was agreed that appropriate medical care, if close by, would be the better choice. Due to a lack of membership attendance this discussion was tabled.

An updated affiliation contract between the department and CRMC was discussed. The new contract has more detailed requirements than previous agreements.

Employment candidate interviews were discussed. It is thought that the copious numbers of candidates can be trimmed to a more reasonable amount by holding an “employment exam” night. Candidates scoring 80% or greater would be invited back to the “interview day” session on the third Wed. of each month. This would release the returning candidate approximately one hour sooner from the interview, however, it would not eliminate the need for at least eight personnel for the interview. As it stands, the practical exam takes two people, the interview takes three, and the oral boards sessions takes three.

Organizational skills practicals were discussed (again). According to the latest NCCEP document there are 57 skills that must be checked off each year by NC ALS providers. Options for skills confirmation were discussed, to include data gathering, infield skills precepting by CCEMS preceptors, and on shift skills sessions by FTOs. It was mentioned that PCR data could be false, depending on the accuracy of the data that’s entered. In field skills confirmation could be hit or miss, depending on if an approved preceptor was nearby to verify that the skill was correctly performed and the ALS provider has his skill check off sheets at hand. On shift skills sessions were considered the most reliable, however, FTOs would have to be available, and “off the truck”, for this process to be timely, consistent, and available for CCEMS personnel. An average of 14 skills per ALS provider would have to be verified every three months to meet the NCOEMS requirement.

There will be an FTO meeting Aug. 31<sup>st</sup> at 08:00 hrs. The SCTP meeting for Aug. 31<sup>st</sup> has been cancelled. It will resume its regular meeting dates, after the QI Meeting, Sept. 28<sup>th</sup>.

The next QI meeting will be Sept. 28<sup>th</sup>, at 08:00 hrs, at 408 E. Marion St.