



Emergency Medical Services Council



Health Services Building – MC L963 525
Portland Avenue South Minneapolis, MN 55415-1569
chd.ems@co.hennepin.mn.us

Operations and System Communications Committee
Tuesday, Jan. 14, 2025, 9:30 a.m. - 10:30 a.m.
Online

<https://www.hennepin.us/business/work-with-henn-co/ems-planning-reg>

Draft Summary

Present	Absent
<ol style="list-style-type: none"> 1. Tony Martin (Hennepin County Sheriff’s Office Primary Dispatch), Chair 2. Mark Anderson, Ridgeview Ambulance Service 3. Tony Ebensteiner, North Memorial Ambulance 4. Dan Klawitter (West MRCC) 5. Pete Tanghe, MD (North Memorial Health Ambulance) 6. Shaun White, Edina Fire EMS 7. Dale Specken, Hopkins Fire Dept. Chief; Hennepin County Fire Chiefs Association 8. Charlie Sloan, Hennepin EMS 9. Kevin Miller, Allina Health EMS 	
Guests	Staff
<ol style="list-style-type: none"> 1. Tyler Lupkes, Hennepin EMS and MESB 2. Brent Custard, North Memorial Health Ambulance 	<ol style="list-style-type: none"> 1. Kristin Mellstrom

1) Welcome and Introductions – Chair Tony Martin called the meeting to order at 9:30 a.m. with a quorum present. Today’s agenda and the meeting summary from Oct. 8, 2024 were approved.

2) Review of Seats on Committee, Nominations

Changes to the bylaws recently approved by the Hennepin County Board of Commissioners require a social worker to be added to this committee. Kristin can send an email out to EMS Council contacts and internal leadership at COPE and the Mental Health Center to gather nominations.

There are several ways that social workers are already involved with 9-1-1 communications and EMS and discussions underway at the county level about the future of social workers’ collaboration with EMS, police and dispatch centers as pilots for this work end

3) Hospital Destination Matrix

The matrix has been modified to simplify it for EMS as a reference document that will be maintained at East and West MRCC. Updates regarding specific hospital capability changes could be done any time a hospital contacts MRCC to edit its information; annual check-ins with each ED will be done as a standing agenda item every January.

The matrix is intended to be used as a guide to assist EMS crews determine which hospitals have the capabilities needed to evaluate and treat the patient's primary impression/condition thereby preventing secondary transfers when possible.

The matrix is not intended to replace day-to-day updates that are currently done on MNTrac, when MRCCs push out messages to providers about diverts, closures, CT scanner down, lock-downs, etc.

Dan K. proposed additional changes to the matrix:

- Get current info from EDs about capability for either mobile receiving, internal ECPR, both (Abbott), or none.

Kristin will update the Stroke and Trauma levels columns to align with MN Stroke System designations ([Minnesota Stroke System Designated Hospitals - MN Dept. of Health](#)) and MDH Trauma System designations ([Trauma Hospital Portal](#)), respectively.

Most EMS Providers plan to upload this to their online protocol apps, so EMS would need to receive an alert from an MRCC if it makes changes to the primary matrix document.

After Dan and Kristin update this document, it will be sent out with the meeting notes for the committee to review before it's sent out to hospitals to complete their updates.

4) Monthly Radio Checks – Dan proposed a change to the current procedure for conducting radio checks at west side hospitals because it tends to be assigned to one person at each hospital so most staff aren't familiar with the MRCC radios. It would be better to have unscheduled checks each month so it would better test the capability of each hospital to receive medical control radio calls and how to operate each type of radio.

West MRCC has been functioning as the default assistance group for training hospital staff on radios, troubleshooting, and could now gather a list of each hospital's vendor for their radio.

Dan will work on a new protocol for radio checks and send it along with the meeting notes.

5) EMS Council Communication Policy

Dan has been working with east and west side MRCCs to create quick guides to match patient report format guidelines across the region. Dan has several proposed changes to the report format and data elements. He will send a marked up copy of the proposed changes to Kristin to send to the group to review before the next meeting.

MIST Report at hand-off at ED

Currently there isn't a separate policy about MIST or any other report format at hand-off. A note could be made within this policy that a MIST report at the hospital should be provided whenever possible as a best practice. Dan noted that all the data that would be needed for a MIST report would be contained in the patient report between the MRCC and the hospital via Zipit, it's just in a different sequence.

Metro Region Incident Response Plan (IRP)

Dan noted that the metro region IRP is not linked anywhere to EMS Council policies.

Discussion of how to address different aspects of patient information including data elements, documentation, and delivery methods for the information at each point along the patient's continuum of care. At the next meeting, the committee will determine if all components of communications should be incorporated into one policy or if there should be separate policies.

6) Public Education

No updates

7) Equipment Exchange

No updates

8) Partner Agency Reports

No updates

9) Legislative Updates

No updates

10) Request from Minneapolis Citizen Group – Lights and Sirens

The group would like to attend the July committee meeting to discuss concerns about lights and sirens use. This decided that, while it invites all members of the EMS Council and/or the public to attend this meeting, it would does not plan to add this topic to a future agenda at this time.

11) The meeting adjourned at 10:33 a.m.

Meetings

Second Tuesday of Jan., April, July, Oct. from 9:30 a.m.-10:30 a.m. online

Next meeting will be April 8 online at 9:30-10:30 a.m.

