

CT EMS Volunteer Committee Notice and Agenda October 4, 2020

Meeting Date: Wednesday October 7th. 2020 7 PM

Location: Virtual Meeting

Meeting Agenda

Review Bureau of Justice Assistance(BJA) Public Safety Officers Benefits Program updated every October. 2020 Benefit \$365.670 for eligible deaths and disabilities and \$1,248 monthly for full-time attendance education benefit
CHECK FOR UPDATE as of October 2021 not posted as of 10/4

Review proposal to change Regulation 19a-178-11-minimim staffing for EMS
Currently a Basic Ambulance Service ambulance shall have as minimum personnel, One EMT who shall attend the patient in the patient compartment of the ambulance at all times and One EMR

Currently a Paramedic level ambulance shall have the capability of proving at least One EMT and One Paramedic. The Paramedic shall provide advanced level skills.

Mobile Intensive Care A-EMT ambulance staffing will at a minimum One A EMT and One EMT. The A EMT shall attend the patent in the patient compartment of the ambulance at all times.

Our goal is to allow for having as a minimum ALS ambulance crew consist of One Paramedic and one CT DPH certified EMS personnel, EMR, EMT or AEMT.
For us to start the procedure for this change we must submit supporting documentation showing why this change will improve patient care.

Proposed language: (thank you Kate Coupe Chief of Service Granby Ambulance Association)

An ALS crew shall consist of (1) CT DPH Paramedic with medical authorization to practice (or as stated in regulation) , and at least one other DPH certified EMS Personnel: Emergency Medical Responder (EMR), Emergency Medical Technician (EMT) , OR Advanced Emergency Medical Technician (AEMT)
When a Paramedic and EMR are serving as an ambulance crew, the Paramedic shall perform all primary patient care, as well as complete the patient care documentation subsequent to any disposition of the patient or scene.

When a Paramedic and an EMT or AEMT are serving as an ambulance crew, the appropriate level of care provider to the needs of the patient. Sponsor hospital or agency specific guidelines may provide protocols for downgrades or may require the highest level of provider to provide at all times.

Time permitting review CT EMS Advisory Board activities.

Schedule next meeting

New Business: Any other items as suggested

Thank you

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