



STATE OF MAINE
 DEPARTMENT OF PUBLIC SAFETY
 MAINE EMERGENCY MEDICAL SERVICES
 152 STATE HOUSE STATION
 AUGUSTA, MAINE 04333



PAUL R. LEPAGE
 GOVERNOR

JOHN E. MORRIS
 COMMISSIONER

SHAUN A. ST. GERMAIN
 DIRECTOR

BOARD OF EMS MEETING
 OCTOBER 5, 2016
 9:30 AM
 DE CHAMPLAIN CONFERENCE ROOM

MINUTES - DRAFT

Members Present: Jeff Rowe, Nancy Jackson, Lori Metayer, Laura Downing, Joseph Kellner, Brad Chicoine, Denys Cornelio, Carolyn Brouillard, Greg Coyne, John Martel, Joe Conley, Tim Beals, Judy Gerrish, Kate Zimmerman, Matt Sholl
 Members Absent:

Staff: Shaun St. Germain, Jon Powers, Alan Leo, Jason Oko

Office of the Attorney General: Katie Johnson, AAG

Regional Coordinators: Rick Petrie, Atlantic Partners EMS; Joanne LeBrun, tri County EMS

Guests: Marc Minkler, Chris Pare

Meeting Called to Order: 9:30 AM

1. Introductions are made.
 - a. Moment of Silence for past board member (PK)Paul Knowlton
 - i. Joe Kellner offered information on the arrangements
2. Minutes – August 2015
 - a. There is some typographical errors in the draft minutes from August
 - i. Investigation 16-066 has Clarify the changes to the proposed consent agreement
 - ii. Investigation 16-053 motion to enter and exit executive session and
 - iii. remove the notes from REPLICA section and the denial section from the AAG
 - b. **MOTION: Motion to accept corrections ; Greg Coyne / Denys Cornelio; unanimous**
 - c. **MOTION: Motion to accept minutes as amended ; Joe Kellner / Denys Cornelio; unanimous**
3. Public comments – No Public Comment
4. Maine EMS Update

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With offices located at the Central Maine Commerce Center, 45 Commerce Drive, Suite 1, Augusta, ME 04330

- a. Budget – Shaun St. Germain reported that the planning for the fiscal year budget for FY 2018 & 2019 has begun
 - i. No Changes to FY 2018
 - ii. FY 2019 has a \$200,000.00 cut from the General Fund for the Maine EMS Budget
- b. Legislation – Shaun St. Germain reported on three items brought forth to the Commissioner of Public Safety
 - i. Requesting the status of the Community Paramedicine Pilot Project be moved into permanent status
 - ii. Mandatory Background checks for license renewals will not be moving forward, this does affect the REPLICA Project and,
 - iii. The plan to transfer the Maine EMS administration of grant money for LifeFlight of Maine, to LifeFlight of Maine has not been moved along in the legislative process
- c. Community Paramedicine – Shaun St. Germain reported that legislation is in the works to move the project into permanent status
 - i. Cumberland Fire Department has withdrawn their application to be a pilot project site
 - ii. St George Ambulance has proposed an amendment to their current plan.
 - iii. A draft proposal has been received from Northeast Harbor Ambulance
- d. Ops – Met earlier this week
 - i. requested that we propose to the board a question regarding committee makeups
 - Question – Should the makeup of the education committee be geographic or regional representation
 - a. Ruling in 2009 that this was a geographical representative
 - Joanne and Rick reported that the issue arose from individuals being geographical representatives that were not willing to report back to the region on projects with education committee; should restructuring of the committee be postponed until after the assessment is complete and the report has been reviewed.
 - Chris Pare reported there has been a large shift in the education committee membership, this recent shift has been large and has forced the committee to look at how they staff the committee. There is a large interest in becoming a member. In reviewing the documentation, there was no direction in the past for members of the committee to report activities to the regional council. Chris would like to set several items in motion prior to the committee choosing a permanent chair;
 - a. Establish some responsibilities for people that are incumbent in the position
 - b. Ensuring there is a mechanism for the individuals in the committee to engage with the area they are representing
 - Chris Pare advised that the Education Committee has always been inclusive and stated that any action or inaction by the board would not hamper them moving forward. Any

- individual that attends the meeting will have a voice at the table regardless if they are a member or not.
- Shaun proposed a review of the makeup and functions of all the committees when the Assessment Report has been returned
- Tim Proposed a review of the roles and responsibilities of all committee members and the structures of the committees
- The discussion was tabled
- e. Assessment review and Discussion – Shaun St. Germain reported that;
 - i. Nearly 100 people attended the open forums
 - ii. Board members had the opportunity to participate in the one-on-one meetings
 - iii. Shaun would like to see from each board member a contribution to a plan going forward
 - Plan for the next year
 - We will start to review the items in December
 - Committee make up
 - a. Should there be term limits
 - b. Please bring the thoughts to Shaun
 - The assessment should be back mid-November, with time to review it prior to the next board meeting.

5. Medical Director Report

- a. MDPB – Dr. Sholl reported – MDPB has not met since July
 - i. The NASEMSO Meeting conflicted with MDPB, there was no alternative dates that were able to meet the needs for the group as it pertains to the protocol review
 - ii. Red section is currently being reviewed by Dr. Zimmerman
 - iii. Maine is the only state with an Associate Medical Director
 - iv. Maine EMS was approached by Humana regarding collaboration between the two entities around community paramedicine and remunerations for community paramedicine services
 - v. Colorado is seeing a large volume free standing emergency departments popping up on large corners that are refusing to take patients without insurance, leaving the major facilities with the indigent population thus creating a hardship, Maryland has seen the same issue, however, the hospital must receive a certificate of need from the state EMS office with the opportunity to offer feedback on how the closure will impact EMS Services and patient care, however, the hospital leadership has shut the entire hospital down once they received the fed back from the EMS office
 - vi. The opioid epidemic is a struggle everywhere, and how to best position naloxone in the community, Ohio is dealing with an insurgence of Carefentanil into the opioid supply, an opioid used for large animal veterinary services, 2 mg is enough to down a bull elephant and there have been some instances of transdermal transmission to veterinarians resulting in large doses of field naloxone and long standing naloxone drips in the ICU
 - vii. The cost of Epi-Pens, MDPB has been talking about this for a while now, several states have started some different programs that allow

- providers to draw up 1:100 epi and administer it with a syringe that has a hard stop at .3 CC's
- viii. Compass will be wrapping up soon, Matt will report back as soon as the report becomes available.
 - ix. Stroke regionalization and ensuring that all individuals suffering from stroke, in our state are being offered top notch care needs to be a priority of the MDPB. Working with hospitals to ensure we can assess and treat rapidly stroke patients
 - x. DEA Access to Emergency Medications Act appears that it will pass, this may create the necessity of service level medical direction, the bill does not state this, but the directive sounds like it is referring to service level medical direction for services that administer controlled medications
 - xi. The CARES Registry went live September 1, 2016
 - xii. We had received a report of a service being unable to restock naloxone; our new Pharmacy rep (Bethany Nash, PharmD) found that there is no shortage of naloxone. Ohio created a requirement that in the face of a shortage, Naloxone would be provided to EMS first not in favor of the lay person. Matt feels in Maine we have some tool in our EMS tool box to react to a shortage without administration of naloxone and should we encounter a naloxone shortage we will discuss the prioritization of naloxone.
- b. QA/I – Dr. Matt Sholl reported that
 - i. The Patient refusal study has wrapped up, training and report has not been released
 - ii. The Committee has as well not met since July and will work to formalize their meeting schedule as well as the next study topic.

6. Investigations

- a. Committee Minutes and recommendations
 - i. Alan Leo presented the investigations committee minutes
 - ii. ***MOTION: Motion to accept the minutes as presented Laura Downing/ Second by Judy Gerrish, unanimous with one abstention, Tim Beals Abstained***
 - iii. Case 16-043 is awaiting completion of a QA/QI plan
 - iv. ***Motion to table case 16-043 by Joe Conley/ Second by Lori Metayer, unanimous***
 - v. ***Motion to approve the recommendations of the investigations committee by Joe Kellner/ Second by Joe Conley, unanimous with one abstention, Tim Beals Abstained***

7. Old Business

- a. Draft Rule Changes
 - i. Sub Committee Report – Jason Oko gave the report,
 - ii. The committee has been reviewing the proposed changes to the document.
 - iii. We will be drafting a “Transport” chapter
 - iv. No action necessary at this time

8. New Business

- a. Brian Dunnigan – Petition
 - i. Shaun presented a request from Mr. Dunnigan that his 2008 consent agreement be amended. In the consent agreement it states that Mr. Dunnigan was convicted of a felony assault against a Police Officer in Massachusetts, Mr. Dunnigan claims that the conviction has been overturned.
 - ii. Mr. Dunnigan was requested to provide information indicating that the conviction had been overturned and he has not submitted any supporting documentation
 - iii. Recommendation from Shaun that we not amend any consent agreement or past board minutes
 - iv. AAG Katie Johnson requested the office to send a letter to Mr. Dunnigan requesting additional documentation.
 - v. ***Motion to Decline Mr. Dunnigan’s request by Joe Kellner/ Second by Joe Conley, unanimous***
- b. Interim Consent Agreement.
 - i. Katie Johnson requested the board to approve an interim consent agreement that would allow the board to remove from practice, a provider that is facing criminal charges. This would suspend the license until the criminal case has been resolved. This would allow the provider to not have to make any admissions to the Maine EMS Board that would impact their criminal case.
 - ii. The ability to sign the agreement would be delegated to Shaun, it would not include an admission and it would clarify that the license would not be automatically returned when the criminal case has been resolved.
 - iii. The investigation process would then resume after the completion of the criminal case.
 - iv. ***Motion to authorize an interim consent agreement when a licensee is facing criminal charges by Tim Beals/ Second by Judy Gerrish, unanimous.***
- c. FOAA presentation by Katie Johnson, AAG
 - i. The presentation has been forwarded to all board members
 - ii. Parties interested in viewing the presentation may contact the Maine EMS Office

9. Committee Reports

- a. Education –
 - i. Chris Pare reported – nothing to report he will be the interim chair until such time as the committee positions have been filled and selection process has been outlined for the position of the chair and the chair has been filled by the board chair.
- b. Data –
 - i. Jon Powers reported continuing work towards the release of the elite system,
 - ii. Simultaneously working with the Fire Marshall’s Office to release the fire reporting system; several fire departments have been on boarded. We are starting to collect fire data
 - iii. There are some work flow issues that are being addressed.

- iv. Bulk of the education for the Elite System education should be released in November. The URL will be different as both will be kept active for a short period of time after the debut on January 1, 2017.
- v. The CARES Registry is up and running and has been collecting data
- vi. We have a contract with The Health Info-Net; this will give us access to all of the EMS patient care records carrying into the Health Info-Net, more at the next Board Meeting. This has been a seven year project.
- vii. The account has been setup for the beginning of CARES research on patient outcomes providing immediate access to that data and we will then be able to report it back to the services.
- viii. The trauma registry project is underway; the discussion with the trauma services needs to happen to determine if they would like to continue using their current system and upload the data into the registry or to use the system directly. The system has been funded by The Department of Highway Safety and was a funding priority for NHITSA to establish a single, statewide trauma registry.
- c. Exam –
 - i. Nothing to report, there was no meeting held
- d. EMD –
 - i. Jason Oko Reported the committee has not met, the next meeting is scheduled for November 21, 2016
 - ii. Shaun reported the difficulties surrounding filling the EMD Coordinator position due to the State of Maine Job Classification as a Public Health Educator III and the efforts he is taking to address the discrepancy. He hopes to have someone in that position shortly.

10. Other

- a. Next Meeting will be December 7, 2016 at 9:30 AM

11. Meeting adjourned at 11:30 AM