



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



JANET T. MILLS
GOVERNOR

MIKE SAUSCHUCK
COMMISSIONER

J. SAM HURLEY
DIRECTOR

Medical Direction and Practices Board – July 21, 2021

Minutes

Conference Phone Number: 1-646-876-9923 **Meeting Number:** 81559853848

Zoom Address: <https://mainestate.zoom.us/j/81559853848>

Please Note: This meeting will be shared with the LifeFlight of Maine CPC, which will begin at 0900. Please note, these meetings will be virtual.

Members present: *Matt Sholl, Beth Collamore, Mike Bohanske, Dave Saquet, Kate Zimmerman, Benjy Lowry, Kelly Meehan-Coussee, Tim Pieh, Seth Ritter, Bethany Nash, Pete Tilney*

Members Absent:

MEMS Staff: *Chris Azevedo, Marc Minkler, Sam Hurley, Melissa Adams, Darren Davis, Jason Oko*

Stakeholders: *Mike Choate, Steve Almquist, Norm Dinerman, Brad Chicoine, Chase Labbe, Oliver Mackenzie, Joanne Lebrun, Jay Bradshaw, Chip Getchell, Rick Petrie, Kelly Klein, Rob Sharkey, Eric Wellman, Steve Smith, Butch Russel, Dan Pugsley, Phillip MacCallum, Andi McGraw, Jaclyn Hazelwood, Carl Zenk, Dan Masselli*

MDPB Agenda – Meeting begins at 0900

- 1) Introductions and online roll call –Sholl – 0900-0905
- 2) June 2021 MDPB Minutes – 0905-0910
 - a. Tabled for next meeting.
- 3) State Update – 0910-0925
 - a. Director Hurley
 - i. Continuing to work with DHHS for funding for disparities grant. There are concerns the grant money will be reduced, despite requiring the same deliverables. We are working with them on this issue.
 - ii. Maine EMS submitted \$6 million grant to COSAP for potential field initiation of suboxone project. Developed proposal for how we'd do this statewide, including bringing on 2 physicians to support the project. End of August to hear on grant
 - iii. A \$2 million grant was submitted for substance abuse education.
 - iv. Working on guidance document to be submitted to MDPB regarding pilot project requirements policy/procedure. Maine EMS has begun a draft of this.
 - v. EMS services received an email yesterday regarding language line services. Maine EMS has learned that there is potential for a lawsuit due to an issue wherein an EMS crew refused to use a language line and there was patient harm done. We reached out to DHHS and found out that a language line service has been required since passage of the Affordable Care Act. Maine EMS subsequently sent out a reminder to EMS services reminding them that there are language line use options available throughout the state. Director Hurely discusses fees for use being based upon usage, not flat fee.

- b. EMS-C-
 - i. Marc Minkler
 - 1. The Pediatric VR headset project continues. Working with York Hospital, Rockland FD, Bath FD at this time. Have begun to schedule one-off training with single services. Conducting a 1-year project with three services to look at improvement.
 - c. EMD/Licensing
 - i. Melissa Adams
 - 1. Nothing to report
 - d. Director Hurley adds that he's beginning to work on Rules and AED registry.
 - e. Education
 - i. Chris Azevedo
 - 1. Nothing to report.
 - f. Dr. Sholl
 - i. MDPB reviewed and approved a research project that looks to validate FAST-ED score in prehospital environment. This went live 1 July 2021.
- 4) Special Circumstances Protocol Review – NONE
- a. None
- 5) New Devices– NONE
- i. None
- 6) UPDATE –Medication Shortages – Nash /All – 0925-0940
- a. Dr. Nash
 - i. Nothing on the docket at this time. Prefilled syringes wax and wane, but nothing else to look out for.
- 7) COVID-19 – 0940-0950
- a. Dr. Sholl
 - i. Discusses emergence of delta variant and vaccinations.
 - ii. CDC has postulated that delta variant will be most commonly circulating variant in the country and the world. Some communities nationwide are going back to masking.
 - iii. This brings the need for EMS in Maine to maintain vigilance.
 - iv. Delta variant is 50-60 times more transmissible than alpha variant. Also more virulent. Delta variant diminishes vaccination protection to about 30%.
 - v. Emphasizes importance of EMS personnel and services maintaining protective postures.
 - b. Dr. Sholl also adds a reminder that the COVID update meeting schedule for the MDPB has been changed to the first Monday of the month. The first meeting on that schedule is in August.
- 8) 2021 Protocol Update –All – 0950-1100
- a. 2021 Protocol Timeline review – Sholl/Zimmerman/All
 - i. Dr. Sholl reviews the protocol update timeline and reviews MDPB authorship process.
 - 1. Asks that section authors review protocol drafts for spelling, grammar, and formatting. Please send changes to Drs. Sholl and Zimmerman and they will be made.
 - 2. Any major changes at this point can be noted, but it is too late to make any substantial changes.
 - ii. Dr. Zimmerman reminds group that major changes are difficult to make at this point as it affects work of both MDPB and Education Committee
 - iii. Dr. Pieh discusses QA markers.
 - iv. Dr. Bohanske
 - 1. What's the goal for section authors reviewing for spelling and grammar?
 - 2. Dr. Sholl- the document needs to be published by 1 Sep 2021 and we need a final document by then for education distribution. Asks if the timeline for section review is sufficient (2-weeks)? Agreement among group members.

- a. 4 August is due date for change comments from review period.
 - b. Dr. Sholl thanks additional persons who are involved in the protocol review and editing process.
- b. 2021 Protocol Discussion
 - i. Red 2 – Discussion – EMT and acquisition of 12-leads
 - 1. Dr. Sholl shares screen with the group
 - 2. This is one of the items brought up in 2019 scope of practice update.
 - 3. Concept of developing education for this by the Education Committee has been brought to that group and they agreed it was possible.
 - 4. The Education Committee has commented about language emphasizing that just because BLS is doing this does not mean ALS is not required. Dr. Sholl reviews proposed language.
 - ii. Bradycardia #1 protocol
 - 1. Dr. Sholl discusses possible addition of atropine.
 - iii. Hyperkalemia protocol
 - 1. Dr. Sholl covers changes to this.
 - iv. Acetaminophen Administration time
 - 1. Dr. Sholl covers changes to the PEARL
 - v. IV Push definition
 - 1. Discussion of changes with Dr. Nash.
 - vi. Pediatric vital signs card and revision of same table in protocols
 - 1. Dr. Sholl shares his screen and displays changes. The protocol table now mirrors the pediatric card.
 - vii. Discussion re: Transitions of Care
 - 1. This is “transfer of care” in the definitions section of protocols. Dr. Sholl discusses impetus of change addition.
 - 2. Motion by Dr. Pieh and seconded by Dr. Zimmerman to accept language as written. No discussion. Motion carried.
 - viii. Discussion – Scope of Practice of the EMR
 - 1. Dr. Sholl discusses addition of
 - a. Narcan dispensing to EMR scope of practice.
 - b. Wound packing
 - c. Cervical collars and extremity splinting
 - d. Eye flushing
 - 2. Discusses new note in Definitions section of protocols under “Emergency Medical Responder”
 - a. Dr. Pieh asks about bringing EMR scope into protocol format along with other provider levels. Dr. Sholl advises this should be left for next cycle.
 - 3. Motion by Dr. Meehan-Coussee and seconded by Dr. Collamore to accept language as written. No discussion. Motion carried.
 - ix. Changes in contact addresses, phone numbers, etc., in Gray section.
 - 1. Dr. Sholl asks the group to review for corrections to ensure this is up to date.
 - x. Discussion – Annex – K9 protocols
 - 1. Dr. Sholl discusses. Maine will be the first state in the country with canine protocols.
 - 2. Dr. Zimmerman shares draft protocol slide with the group and discusses.
 - 3. Dr. Sholl- these will be limited to clinicians with specific training. Not looking for approval of the protocols today, just wanted to introduce these today. Canine protocols have been vetted by subject matter experts nationally.
- c. Review – minimum requirements for warming pads
 - i. Dr. Sholl discusses EMS-C idea for infant warming pads and subsequent exploration of the idea. Shares Marc Minkler’s recommendation items with the group.

- ii. Motion by Dr. Lowry and seconded by Dr. Meehan-Coussee to accept the language. No discussion. Motion carried.
 - d. Dedication page addition.
 - i. Dr. Sholl discusses addition acknowledging EMS clinician efforts in response to the COVID pandemic and shares the verbiage with the group.
 - e. Discussion – remaining steps in the protocol review process – Sholl/All
 - i. Dr. Sholl reviews. MDPB is up to date on its deliverables for this update process.
- 9) BLS Representative Position on the MDPB
 - a. Dr. Sholl
 - i. Adam Thacker has resigned from this position due to changes in professional life, effective in June. Thanks to Mr. Thacker for his participation and his openness regarding his situation.
 - ii. The position is now open. We will need to post the position again and conduct interviews. Would like at least 2 other MDPB members to work with Drs. Sholl and Zimmerman in the process.
 - b. Dr. Bohanske volunteers to assist, as does Dr. Lowry. Dr. Nash volunteers as an alternate.
- 10) Discussion – August 2021 meeting
 - a. Dr. Sholl leads discussion regarding whether or not to take August off, as has been past precedent. Discussion.
 - b. Dr. Tilney asks that IFT be put specifically on agenda for a meeting. Dr. Sholl agrees and discusses putting this on the agenda for September meeting.
- 11) Discussion – Spit Hoods
 - a. Dr. Pieh discusses. Was approached by paramedic asking if it was ok for EMS to use spit hoods. Concerns about infectious disease spread. The provider, in his request had attached current spit hood protocols in other states as examples.
 - b. Discussion ensues. Dr. Bohanske discusses issues and concerns regarding use and stocking of the equipment.
 - c. Dr. Zimmerman makes a motion that spit hoods should not be added as approved EMS equipment. Motion seconded by Dr. Bohanske. Discussion.
 - d. Marc Minkler adds this might be a good note to insert in the Maine EMS list of approved equipment. Dr. Sholl agrees to discuss offline.
 - e. Motion carried.
- 12) Question – reporting schedule for the Portland Fire Department/MMO pilot project?
 - a. Tabled for August meeting.

Old Business – 1100 - 1110

- 1) Ops
 - a. Director Hurley defers to Joanne Lebrun for Ops Team summary.
 - i. The Ops Team discussed many of same items Director Hurley has already discussed.
 - ii. The Team also discussed progression on contract interpretations.
- 2) Education
 - a. Chris Azevedo - Nothing to report.
- 3) QI
 - a. Jason Oko
 - i. QA Committee has open position they are filling.
 - ii. Data Committee defining and working on goals
- 4) Community Paramedicine
 - a. Jason Oko
 - i. Purchased the Community Paramedicine module for Image Trend patient care reporting.

- 5) EMS-C
 - a. Marc Minkler- Nothing to report
- 6) TAC
 - a. Dr. Zimmerman - working on statewide trauma plan. Stroke alliance working on bylaws and plan.
- 7) Maine Heart Rescue
 - a. Nothing to report.

Motion to adjourn made by Dr. Ritter and seconded by Dr. Nash. MDPB section adjourned at 1116 hours.

Ongoing Items for Future Discussion:

PIFT protocols/IFT Committee – Tilney/Sholl

The LFOM CPC Meeting will begin at 1115. The QI Committee meeting will begin at 1330.