



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



JANET T. MILLS
 GOVERNOR

MICHAEL SAUSCHUCK
 COMMISSIONER

J. SAM HURLEY
 DIRECTOR

BOARD OF EMS MEETING
 MAY 4, 2022
 ZOOM

“The mission of Maine EMS is to promote and provide for a comprehensive and effective Emergency Medical Services system to ensure optimum patient care with standards for all providers. All members of this board should strive to promote the core values of excellence, support, collaboration, and integrity. In serving on this Board, we commit to serve the respective providers, communities, and residents of the jurisdictions that we represent.”

Board Members Attendance:

Member	In Attendance	Absent	Late Arrival	Other Notes
Nate Allen		X		
Tim Beals	X			
Bill Cyr	X			
Katelyn Damon	X			
Rosie Davis	X		9:45	Signed off 11:52
Laura Downing	X			
Amy Drinkwater	X			
Judy Gerrish	X			
Brandon Giberson	X			
Joe Kellner	X			
Rich Kindelan		X		
Brent Libby	X			Connectivity issues around 12:15
John Martel	X			

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TTY: (207) 287-3659

FAX: (207) 287-6251

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

Maria Russell	X			11:10 stepped away
Steve Smith	X			
Tiffany Tscherne	X			
Andy Turcotte	X			
Chris Whytock	X			

Staff Present: Director Sam Hurley, Melissa Adams, Marc Minkler, Chris Azevedo, Dave Davies, Jason Oko, Darren Davis, Ashley Moody, AAG Lisa Wilson; Dr. Matt Sholl, Dr. Kate Zimmerman

Stakeholders: Abigail McMahon, Aiden Koplovsky, Ben Wallace Jr., Dr. Benjy Lowry, Bob S., Chase Labbe, Chip Getchell, Dayna Emerson, Carroll Tibbetts, Dennis Russell, Don Sheets, Donald Burr, Dwight Corning, Ed Moreshead, Eric Wellman, Jay Bradshaw, Jim MacDonnell, Joanne Lebrun, John Hoak, Leah Mitchell, Mark Hernandez, Patrick Underwood, Rick Petrie, Sally Taylor, Steve, Suzanne Grace, Dr. Rebecca Taylor, Yarmouth FD2, Rachael Trefethan, Phil MacCallum, Mike Senecal, Scott Loureiro, Shawn Cordwell.

Call to Order: 9:30

Introductions

1. Disclosure of any conflicts of interest

Maria Russell – Recusal from case 21-185; sits on advisory panel for SMCC’s paramedic program

Beals – Serves as adjunct faculty at SMCC

Turcotte – Serves on advisory panel for SMCC’s paramedic program

2. Modifications to the Agenda

- a. Additional data request added

3. Public Comments

Dennis Russell – requests the Board consider allowing any training center to participate in the portfolio process

Don Sheets – states this portfolio program was not intended to exclusively serve as a pilot program for SMCC

4. Minutes

- a. April 6, 2022

MOTION: Approve April 6, 2022 meeting minutes with amendment of adding Dr. Zimmerman to attendance and correcting Dr. Scott's name on page 8.

Made by: Drinkwater; Seconded by: Smith

Roll Call Vote: (Yes): Beals, Cyr, Damon, Downing, Drinkwater, Gerrish, Giberson, Kellner, Libby, Martel, Russel, Smith, Tscherne, Turcotte, Whytock

Abstain: None

No: None

MOTION CARRIES

5. Director's Report

- a. Maine EMS continues to work with human resources for hiring and with John from SafeTech Solutions.
- b. Jason Oko – Data & QI Committee (Oko)
 - a. Naloxone and Substance Use Disorder Newsletter has been published
 - b. Next newsletter will revisit stroke care
 - c. Continue to work through the NEMSIS V3.5 dataset to better integrate those data elements into the ePCR system
 - d. Improving data collection processes within MEFIRS related to the processing of CARES data
 - e. Improving the eLicensing system for automated renewals with anticipate deployment in June
 - f. Moving service administration update forms to online versus paper forms
- c. Darren – Labor & Financial Health Committee
 - a. Maine EMS has begun submissions to ODMAP
 - b. Financial health committee is beginning its work and there should be an update at the June meeting
 - c. Labor committee meets on the upcoming Friday and will review survey results
- d. Ashley
 - a. Maine EMS is hosting a Cardiovascular Mini-Summit in Augusta on Thursday, May 12, 2022 – members of the Board and interested parties are invited to attend
 - b. Maine EMS has posted materials on MEMSEd related to posterior stroke in collaboration with the Maine Stroke Alliance – Posterior Stroke Education
 - c. Working to input information into the CARES Registry
- e. Chris Azevedo
 - a. Collaborating with the University of Southern Maine to assist with getting materials on MEMSEd related to a Harwood Grant
- f. Jason Cooney
 - a. Introduced as the newest Licensing Agent at Maine EMS

- g. Melissa Adams
 - a. Recently returned from the IAED conference in Nashville, TN
 - b. Working to explore opportunities for greater collaboration with EMD/dispatch centers and community paramedicine programming

6. Medical Director Report

- a. Sholl – MDPB
 - i. Continues to meet first Monday of the month to discuss COVID-19
 - ii. Overview of COVID-19 concerns, particularly with emerging variants
 - iii. Emily Wells has been nominated and confirmed to MDPB as BLS Rep
 - iv. Continue to progress on protocols
 - v. Formulary created in collaboration with Maine EMS office and MDPB for all medications in the protocols -- can be found on Maine EMS website
 - vi. Harmonizing equipment list, inspection checklist, and ensure that it is in alignment with the rules
- b. Zimmerman
 - i. Dr. Turner will be joining the TAC in the position vacated by Dr. Neilson
 - ii. Reconvening trauma plan subcommittee
 - iii. Special meeting on May 24, 2022 to discuss bylaws changes and elect a chair
 - iv. Developing STAT (Stroke Technical Assistance Team) visit template which is functionally equivalent to TAC TAT (Trauma Advisory Committee Technical Assistance Team) visits for stroke
 - v. MSA elected Dr. Jane Morris as chair of Maine Stroke Alliance

7. Investigations

MOTION: To accept the minutes of the April 22nd Investigations Committee meeting with a correction of the date listed in the minutes.

Made by: Giberson; Seconded by: Gerrish

Roll Call Vote (Yes): Beals, Downing, Drinkwater, Gerrish, Giberson, Kellner

Abstain: None

No: None

MOTION CARRIES

Summary 21-185: Licensee failed to appropriately identify and treat a patient in ventricular tachycardia.

The Committee recommends resolving the case with a consent agreement for a probationary period during which the licensee will be restricted to the EMT level pending successful completion of full American Heart Association Advanced Cardiovascular Life Support and Pediatric Advanced Life Support and Advanced Medical Life Support. The licensee may perform up to the paramedic level during that time for scheduled preceptorship response with a paramedic-level provider where the licensee must document 25 emergency response calls. After the required training and

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preceptorship, the licensee will be reinstated, but must coordinate a quality assurance review, by a qualified reviewer, for 100% of calls for at least 50 emergency calls.

MOTION: To accept the Investigation Committees recommendation to resolve case 21-185 the amendment that the 25 precepted calls must be at the ALS-level.

Made by: Kellner; Seconded by: Smith

Roll Call Vote: Beals, Cyr, Damon, Davis, Downing, Drinkwater, Gerrish, Giberson, Kellner, Libby, Smith, Tscherne, Turcotte, Whytock

Abstain: Martel

Recusal: Russell

No: None

MOTION CARRIES

Alviar EMT Application Summary: Applicant failed to disclose criminal history on their new application for EMT licensure. The conviction eligible for consideration is reckless conduct, a class D misdemeanor in 2014.

The committee recommends issuing the license with a letter of guidance citing the importance of disclosing all criminal convictions pursuant to 32 M.R.S. §90-C.; the letter is to remain on file for two licensing cycles.

MOTION: To approve the Investigation Committees recommendation.

Made by: Smith; Seconded by: Giberson

Roll Call Vote (Yes): Cyr, Damon, Davis, Downing, Drinkwater, Gerrish, Giberson, Kellner, Libby, Martel, Russell, Smith, Tscherne, Turcotte, Whytock

Recusal: Beals

No: None

MOTION CARRIES

Katelyn Damon asked staff to look into revising application to clarify to applicants that ALL criminal history must be disclosed (e.g., different colors, bolded, etc.).

Speckin EMT Application Summary: The applicant has a conviction for two counts of OUI, a class D misdemeanor, in 2016.

The Committee recommends issuing the license.

MOTION: To approve the Investigation Committees recommendation.

Made by: Smith; Seconded by: Giberson

Roll Call Vote (Yes): Beals, Cyr, Damon, Davis, Downing, Drinkwater, Gerrish, Giberson, Kellner, Libby, Martel, Russell, Smith, Tscherne, Turcotte, Whytock

Recusal: None

No: None

MOTION CARRIES

8. Old Business

a. PIFT Letter from Education Committee

- Aiden Koplovsky penned letter to Committee RE inability for the group to come to a solution in the committee with all of the variables in place
- Kellner referenced commercially available education as mentioned in the letter
 - Sholl -- commercial products will add additional costs initially and sustained due to continuing education; messaging is important as many commercial programs are much more rigorous than PIFT programming currently available; recommended doing a gap analysis between what we have/need
- IFT Committee has agreed to take it on as a priority (Beals)
- Giberson concerned about relying on service level medical directors to be responsible oversight of IFT programming and capacity as referenced in letter received by the Board
- Cyr has volunteered to work on IFT committee; notes increased volume w/ LFOM for PIFT-level transports
- Sholl -- by putting too much responsibility on those service-level medical directors, it may add additional stress and vulnerabilities that are not there currently; wonders if there is sufficient uniformity to develop IFT protocols; concerned about decoupling statewide protocols to localized protocols for IFT
- Petrie -- no consistency in State of Maine w/ IFT; there are inappropriate transports throughout the state; there are medical directors that are not actively involved in the programming; Maine EMS does not have the capacity to maintain the programming -- we need to step away from this model; very few states have a statewide IFT guidelines but instead they are hospital-led protocols led by a local medical director so they can develop a program that works for them; patients are being transported inappropriately
- Koplovsky -- this should ideally take place in the IFT committee; EDU committee is not currently making a recommendation of one option or another but instead are seeking guidance as to what to do next
- Zimmerman -- concerned that if left to the hospitals that it will not adequately reflect provisions of EMS; recommends setting guard rails; recommends IFT and MDPB committee prioritize this; unsure that ED physicians may be unaware of the capacity of EMS clinicians
- Tscherne -- decisions are being made based on immediate need; challenges RE patient transfer and so people are singularly focused; seeing variation and without guidance then venturing away from best practices
- Libby/Giberson -- direct Education Committee to pause and direct MDPB and IFT committee to prioritize this
- Sholl -- recommends that the Education Committee consider commercially available options and present that to the IFT and MDPB (cost -- initial and continuing, offering, etc.)
- Petrie -- requests that PIFT education be discontinued and there be timelines put in place for a report back to the Board
- Libby -- meet and set goals for moving forward at the June Meeting

b. Data Sharing

- Dr. Taylor -- Deputy Dir. Of Research and Evaluation at Office of Behavioral Health
 - Data-informed approach to crisis system design
 - Using data modeling to understand crisis services need/demand
 - MIT Lincoln Lab has constructed a new system for modeling this data which includes 911 data, crisis center data, crisis center teams, ED data, and hopefully EMS data.
 - Introducing Mark Hernandez (MITLL) from MIT's Lincoln Lab to cover technical comments
 - De-identified but does include LAT/LONG which could potentially make it identifiable
 - Discussion from Dr. Taylor, Kellner, and Mr. Hernandez

MOTION: Share data as requested to OBH/MIT including latitude and longitude data with one decimal point removed and city/town for three years or the purpose of public health.

Made by: Kellner; Seconded by: Cyr

Roll Call Vote (Yes): Beals, Cyr, Damon, Davis, Downing, Drinkwater, Gerrish, Giberson, Kellner, Libby, Martel, Russell, Smith, Tscherne, Turcotte, Whytock

Recusal: None

No: None

MOTION CARRIES

- Dr. Sholl discussing MD/MPH student's MPH project; will be looking at the naloxone dispensation program and better understand how it is going; barriers and enablers to dispensation of naloxone from EMS clinicians
 - Data-informed approach to crisis system design
 - Requesting identified information to compare medical examiners listing of mortality records vs. Maine EMS data
 - Looking at implementation processes

MOTION: Approve the Wight study request to include identifiable information to expire on December 31, 2022.

Made by: Kellner; Seconded by: Giberson

Roll Call Vote (Yes): Cyr, Damon, Davis, Downing, Drinkwater, Gerrish, Giberson, Kellner, Libby, Martel, Smith, Tscherne, Turcotte, Whytock

Abstain: Beals

Recusal: None

No: None

MOTION CARRIES

*10 minute break

9. New Business

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a. SMCC Portfolio Proposal

- Don Sheets presented the Exam Committee’s recommendation to move from PSEs to a Portfolio model for meeting the skills assessment requirement for EMR and EMT licensure education programs and to sunset the PSE after 1 year of implementation. This model is demonstrated by SMCCs current program and they report that since they have been using this model in conjunction with PSEs, they have had a 100% pass rate. As an adjunct faculty in the program, Tim Beals advised that although the program is a lot more work for students and faculty, the positive results are obvious with students working better in teams and performing skills with confidence. Joanne Lebrun states that it is her understanding that all training centers have moved toward integrating scenario-based education across patient age-groups with in-class assessment models, so this transition makes sense overall. Dennis Russell agreed that the United training center is also ready to move forward. Tim Beals advised that Delta training center has also adopted the in-class assessment model. Eric Wellman states that the Community College system is willing to offer support to any training center that may need it. Joe Kellner asked how this model may be applied in a standard method across all training centers for equity and objective measurement. Director Hurley states that when the Board acknowledges the SMCC proposal as a pathway forward, each training center must submit their individual program proposal for Maine EMS approval based on an adopted minimum standard. He supports using SMCC’s program as a beta-model to collect objective data and establish criteria for a minimum standard so other training centers can create and propose their own model. Don Sheets clarified that the proposal in front of the Board today is not the SMCC portfolio model, it is what the Exam committee pulled from the SMCC model as a minimum standard, and the intent is for each training center to submit a unique proposal to Maine EMS that meets this these minimum standards.

MOTION: To allow currently approved training centers to adopt the portfolio model through June 1, 2023, any training center application after this point would need to request approval from the Board. Any training center adopting this, must adopt the four documents presented today as a minimum standard and to revise the proposal to allow Maine EMS to request data, as necessary. The training center annual report due March 2023 will include data specific to the outcomes of this model implementation. Subsequent data will be reviewed by the Board to determine how to proceed with the portfolio model. Training centers that established in the interim time must request from the Board to use this approach, and the Board will have the discretion to approve or deny.

Made by: Kellner; Seconded by: Gerrish

Roll Call Vote (Yes): Beals, Cyr, Damon, Downing, Drinkwater, Gerrish, Giberson, Kellner, Libby, Martel, Smith, Tscherne, Turcotte, Whytock

No: None

MOTION CARRIES

b. Labor Committee Waiver Request

- The Labor Committee is seeking a waiver of continuing education requirements for EMR and EMT level licensees who have expired in the last two years or who will expire, this would allow expired licensees to re-enter the workforce and allow current EMR and EMT licensees a license renewal without the barrier of continuing education.
- AAG Lisa Wilson requested that if there is a motion on this, before a vote, the Board should go into executive session to receive legal advice.
- Director Hurley advised that the EMS Office does not support the proposal to allow re-licensure without continuing education. He states the sticking point is that we may allow someone who has had no continuing education for up to 5 years to provide patient care. He presented the Office's proposal to extend the license expiration date for every currently licensed clinician by a standard 18-months as a retention model.

*Libby left the meeting

MOTION: Enter executive session pursuant to 1 MRS § 405(6)(E) & (F) for the Board to receive legal advice.

Made by: Kellner; Seconded by: Damon

Roll Call Vote (Yes): Beals, Cyr, Damon, Downing, Drinkwater, Gerrish, Giberson, Kellner, Martel, Smith, Tscherne, Turcotte, Whytock

Abstain: Russell

No: None

MOTION CARRIES

*Libby joined the meeting

Entered executive session at 12:20

Exited executive session at 12:33

- Factors related to granting the waiver were considered by the Board with mixed responses.

MOTION: To approve the waiver request from the Labor Committee as written. To waive Maine EMS rules, Chapter 5, section 6, paragraph C.1.C.1, and C.1.C.2. as they pertain to licensing rules as long as the following criteria are met: the license has expired or will expire between May 4, 2020 and May 4, 2023 and the individual meets all other requirements for license renewal. The waiver will expire June 1, 2023 and to the extent any other licensing extensions are approved by this Board, they will not apply to provisional licenses granted under this waiver.

Made by: Kellner; Seconded by: Beals

Roll Call Vote (Yes): Beals, Cyr, Damon, Downing, Drinkwater, Gerrish, Giberson, Kellner, Martel, Russell, Smith, Tscherne, Turcotte

Abstain: None

No: Libby, Whytock

MOTION CARRIES

- Director Hurley advised that we will track these licenses to be able to measure the impact.
- c. Maine EMS Office Waiver Request
- Maine EMS circulated proposal and the questions regarding waivers was asked with mixed opinions from members of the Board.

*Downing left the meeting

MOTION: To approve the waiver request from the Maine EMS Office to waive Chapter 5§5 and Chapter 5§6.2.C.1.b. for an automatic extension of 18-months for all active licenses on Friday, May 20, 2022.

Made by: Kellner; Seconded by: Russell

Roll Call Vote (Yes): Beals, Cyr, Damon, Drinkwater, Gerrish, Giberson, Kellner, Libby, Martel, Russell, Smith, Tscherne, Turcotte, Whytock

Abstain: None

No: None

MOTION CARRIES

- d. Rules (Data, AED, Definitions, Equipment, and Ambulance Operators)
- Tabled until May 20, 2022 meeting with the addition of Chapter 5 proposed revisions.

10. Other

- a. Items for next meeting's agenda
- Review Chapter 22 Responses from public comment
 - Chair Libby announces that going forward, items will not be routinely added to the agenda unless they are received the Wednesday (or one week) prior to the Board meeting
- b. Next meeting dates (May 20, 2022 at 09:30 and June 1, 2022 at 09:30)
- Director Hurley advised that the June 1, 2022 meeting will be held in-person with the option for virtual attendance. This will be an all-day meeting with an afternoon hearing starting at 13:00. 8 Board members indicated they were sure they could attend.

11. Adjourn (13:30)

MOTION: To adjourn.

Made by: Drinkwater; Seconded by: Gerrish

No objections

