



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

**IFT Committee – July 11, 2022
 Minutes**

Meeting begins at 0930 (Virtually via Zoom)

Attendees

Committee Members:

Tim Beals, Mike Choate, Chip Getchell, Steve Leach, Chris Pare, Rick Petrie, Dr. Pete Tilney
 (Committee Members Absent: Dr. Matt Sholl, Dr. Corey Cole)

Stakeholders:

Aiden Koplovsky

Maine EMS Staff:

Marc Minkler, Jason Cooney, David Davies, Melissa Adams, Jason Oko

Introductions

A quorum is present.

Beals and Minkler have submitted Petrie’s name to Maine EMS Board Chair Libby, Chair Libby has not yet confirmed the nomination from June 13, 2022 meeting. Petrie will remain as acting chair (Beals concurs, Minkler states that Director Hurley is also amenable to this action)

The Maine EMS Mission Statement is read by Petrie.

Minutes

Motion to approve minutes from June 13, 2022 by Beals, second by Leach. No objections (Pare abstains)

New Business

No additions or deletions to the agenda.

1. Petrie reviews the goals of this committee

- Define responsibility of IFT
- Define multilayer approach to IFT (PIFT vs SCT vs CCT and what defines the criteria/patient condition/resources for each)
- Have Maine EMS Board define a clear current scope of practice for EMS.
 - What exists in rules currently?
 - Request definitions of scope for all EMS levels to help identify the gaps for IFT and what roles can EMS clinicians currently do.
 - NHTSA resources may help but is unwieldy to use on a day-to-day basis.
 - Current IFT scope was developed by MDPB.
- Review data about scope of IFTs in Maine

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- Focus of next meeting will be to look at types of data and other aspects of IFT data
- 2. Discussion of IFTs and clarification
 - Getchell concurs in seeking clarification from Board, scope of practice in particular
 - Choate would like to amend EMTALA and ask the Board – Petrie states this is a federal regulation and likely cannot be changed
 - Pare states deferring responsibility to sending facility may not be possible or preferred and they may not be able to completely control this and a shared responsibility may be better
 - Minkler states perhaps better defining the questions to the board and what specific aspects of the IFT process responsibility and components of the IFT (i.e. care during transport vs FAA inspection of ambulance vs licensure) and may help steer the answers to best assist
 - Pare inquires about not just licensure but the actual credentialing of staff to do the skill sets beyond the Maine EMS protocols and protect hospitals and what is the expected skill set of EMS clinicians
 - Petrie states that Maine law does not require any EMS providers on an IFT and this can be accomplished by an RN or physician providing the patient care (and the credentialing of those individuals by sending hospital). Minkler states that current proposed rules would require a licensed ambulance operator by Maine EMS. Petrie states this is in direct contradiction to existing Maine law.
 - Tilney concurs the hospital staff is credentialled by sending hospital
 - Pare is concerned scope of this committee with hospitals being unsure of how the EMS clinicians are credentialled
 - Petrie asks if value in an AG attending and explaining these aspects in depth. Beals would like all on same page and increase understanding of this. An opinion from AG would be helpful but questions need to be very clear to be able to get an answer.
 - Petrie asks Who is responsible for ensuring the training and credentialing is adequate for the patient care and transport?
 - Choate asks where does documentation of credentialing live and whose responsibility is this?
 - Discussion on wording and depth of questions to pose to Maine EMS Board, results in the following questions:
 - "1. Who is responsible for ensuring that the personnel accompanying a patient during an interfacility transport are qualified to transport that patient?"
 - "2. Who is responsible for setting the protocol/care delivered during an interfacility transport?"
 - "3. To which type of hospital discharges does EMTALA apply?
 - Hospital to Hospital?
 - Hospital to Nursing home/Long term care facility (and vice-versa)?
 - Hospital to specialty clinic (MRI, CT Scan, etc) and vice-versa)?
 - Acute care/walk-in clinic to Hospital?"
 - Beals would like to recommend a scope of practice definition for IFTs and do the groundwork for this for the Board to consider. Petrie suggests this for a future agenda and work item. Tilneys feels that much of this has been done by MDPB with the PIFT decision tree, but work on what is critical care vs PIFT vs ALS. Committee members concur for future work item.
 - Minkler provides preliminary presentation on some EMS IFT data based on data questions from June 14, 2022, with 18 questions from 2 committee members. Some questions require better clarification to answer. (PDF attached to these minutes). Discussion with committee members result in some clarification
 - How many IFTs went Lights & Sirens for hospital-to-hospital transports

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- Total # of staff on ambulance during transport
- Various other clarifications
- Petrie will send a list of updated data questions to Minkler for determination
- Minkler provides some initial data for 1st 6 months of 2022 as a high-level overview (included in PDF listed above). Information to clarify some data results were also provided.
- Group concurs that this is initial info and many of the questions we propose will result in new and additional questions
- Choate is concerned that EMS does not document what is done prior to EMS arrival and that there is no effective way to do this with medications and procedures done by sending facility. Oko clarifies there is an avenue to document care being continued by EMS or even to document data prior to EMS arrival but very few do this. Getchell agrees that few document prior to arrival.

Old Business

No old business.

Adjourn

Group agrees to not meet in August to allow time for board to respond to questions.

Petrie will forward questions developed in this meeting to Maine EMS Board

Motion by Getchell to adjourn, 2nd by Leach, no objections

Meeting adjourned at 11:02

Next meeting is September 12, 2022 from 0930 to 1100