| 1 | 16 | DEPARTMENT OF PUBLIC SAFETY | | |
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| 2 | 163 | BUREAU OF EMERGENCY MEDICAL SERVICES (MAINE EMS) | | |
| 4 5 | СНА | PTER 15: MAINE EMS REGIONS AND REGIONAL COUNCILS | | |
| 6 7 | §1. R | egions | | |
| 8 9 LO | The State of Maine shall be divided into four distinct EMS regions based on geographical county boundaries. Those regions shall be: | | | |
| l1 l2 | | A. Region One: Cumberland and York Counties | | |
| 13 14 15 16 | | B. Region Two: Androscoggin, Franklin, Kennebec, Oxford, Sagadahoc, and Somerset Counties | | |
| 17 18 19 | | C. Region Three: Hancock, Knox, Lincoln, Penobscot, Piscataquis, Waldo, and Washington Counties | | |
| 20 21 | | D. Region Four: Aroostook County | | |
| 22 23 | §2. R | §2. Regional Councils | | |
| 24 25 | 1. Designation | | | |
| 26 27 28 | | A. Each Region shall have one (1) Regional Council; an entity may not serve more than one region | | |
| 29 30 | | B. The Board shall designate regional emergency medical services councils, but in no event shall the number of regional councils exceed four (4) | | |
| 31 32 33 34 35 36 | | C. Such regional councils shall be established by application for designation to be submitted by a business entity. Such application shall describe, at minimum, the region to be served and contain a list of nominees for appointment to voting membership of the council, on an application approved by the Board | | |
| 38 39 40 | | D. The Board, upon a finding that the regional council has failed to execute its duties, may designate another business entity, with a two-thirds majority vote | | |
| 41 42 | 2. Roles and Responsibilities | | | |
| 13 14 15 | | A. The Regional Council and its representative to the Board shall ensure information is shared between the Board, Committees, Entities of the Board, and Office with the local agencies and stakeholders within the region served | | |

- B. The Regional Council shall appoint, subject to approval by the board, a Regional Medical Director, in alignment with §3(1) of this chapter
- C. The Regional Council shall nominate 2 or more candidates from the region for a position on the Board, from whom the Governor may select a member
- D. The Regional Council shall establish a committee to carry out a plan of quality improvement approved by the Board
- E. Each region shall have one (1) Regional Coordinator, who shall be responsible to the Regional Council. This Coordinator shall, with the advice and knowledge of the Regional Council, be responsible for the administration of regional plans, goals, and operations as defined in this rule
 - 1. The Regional Coordinator shall not be a voting member of the Regional Council
 - 2. The Regional Coordinator shall interface with and provide monthly updates to the Office of EMS
 - 3. The vacancy of this position shall be reported to the Office of EMS within seven (7) calendar days

3. Composition

- A. The regional council shall consist of the following voting members. No single Maine EMS-licensed entity shall have more than one voting representative on the council. A regional council shall, at a minimum, consist of:
 - 1. Three representatives from Hospital(s) located within the region. Three representatives from Maine EMS-licensed entities located within the region. Seven (7) representatives currently residing within the region, one of whom is not licensed by the Maine EMS Board. There must, at minimum, be a member chosen from each county represented within the region
- B. A Regional Council shall have no more than 17 voting members
- C. Voting members of the regional councils shall be limited by terms defined by the Regional Council bylaws
- D. The names and public contact information for the voting members of the regional council shall be published digitally, maintained by the regional council. Any changes in name or public contact information shall be published within seven (7) business days

E. The Director may designate an officer or employee of the Office to act as secretary of the regional council and may assign from time to time such other employees as the regional council may require

4. Duties

- A. Make and alter by-laws for its organization and internal management
- B. Convene a meeting no less than four (4) times annually. Draft minutes will be recorded for each of these meetings, which will become final upon a vote of the council. Maine EMS-licensed entities within the region shall receive written notice no later than seven (7) days prior to the meeting. Finalized minutes will be provided within five (5) business days after council approval to the Office of EMS and any Maine EMS-licensed entities within the region
- C. Develop and submit to the Board a comprehensive Regional Plan that provides for the organization and implementation of regional goals and strategies in alignment with the goals and objectives defined by the Board and as defined in the Request for Proposal, if applicable. This plan shall be accompanied by an analysis of regional operations that includes the identification of resources needed to meet the goals and strategies identified within the plan. This plan shall be subject to annual approval by the Board; submission shall be no later than August 15 of each calendar year. The Board will take action on the submitted plan within 70 calendar days after the deadline for submission
- D. Develop a comprehensive Quality Assurance and Improvement plan approved by the Board. This plan must be reviewed and approved by the Board at a minimum every three (3) years
 - 1. The plan shall be based on an ongoing region-wide assessment of EMS and EMD services operating within the region on their capacity, throughput, and the quality of service-level quality assurance/quality improvement efforts
- E. Undertake or cause to be undertaken plans, surveys, analyses and studies necessary, convenient or desirable for the effectuation of its purposes and powers, and to prepare recommendations and reports in regard thereto

§3. Regional Medical Director

1. Each region shall have one (1) Regional Medical Director, who shall be a Maine licensed physician affiliated with a hospital within the region they serve

| 139 | 2. Appointment |
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| 141 | A. Upon appointment by the region, the qualifications and experience of the |
| 142 | licensed physician will be submitted to the Board. The Board, in consultation |
| 143 | with the Medical Direction and Practices Board, shall vote to confirm the |
| 144 | appointment |
| 145 | |
| 146 | 3. Duties |
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| 148 | A. A Regional Medical Director shall serve as a point of contact, coordination, |
| 149 | and advice for Service-Level Medical Directors. A Regional Medical Director |
| 150 | may, at their discretion, serve as a Service-Level Medical Director |
| 151 | may, at their electroness, corve as a zervice zever ricultaness z recor |
| 152 | B. Attend 75% of Regional Quality Assurance and Improvement Committee |
| 153 | Meetings |
| 154 | 1.720 mags |
| 155 | C. Serve as the regional representative to the Medical Direction and Practices |
| 156 | Board, maintaining compliance with that board's bylaws |
| 157 | 2 out a, manifulling out primited with a sixth a system. |
| 158 | D. Will refer, as appropriate, cases to the Office of EMS for investigation, and |
| 159 | after adjudication by the Board of EMS, will serve as a coordinator for |
| 160 | referred matters. A Regional Medical Director may not be referred a matter |
| 161 | that involves a Maine-EMS licensed entity for which they serve as a Service- |
| 162 | Level Medical Director |
| 163 | Level Medical Director |
| 164 | 4. Delegation of Duties |
| 165 | i. Delegation of Daties |
| 166 | A. The Regional Medical Director may delegate in writing to other licensed |
| 167 | physicians the responsibilities of their position. This written delegation must |
| 168 | be submitted to the Office of EMS prior to the delegation's effect |
| 169 | be submitted to the office of Livis prior to the delegation's effect |
| 170 | B. The Regional Medical Director may not delegate their representation to the |
| 171 | Medical Direction and Practices Board |
| 172 | Medical Direction and Fractices Board |
| 173 | §4. Associate Regional Medical Director |
| 174 | 34. Associate Regional Medical Director |
| 175 | 1. Each region may have one (1) Associate Regional Medical Director, who shall be a |
| 176 | Maine-licensed physician |
| 177 | Manie neensed physician |
| 178 | 2. Appointment |
| 179 | 2. Exponement |
| 180 | A. The Associate Regional Medical Director shall be designated by, with the |
| | advice of the Regional Medical Director, the Regional Council |
| 181 | |
| 182 | 3. Duties |
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| 184 | A. The Associate Regional Medical Director may assist the Regional Medical | | | | |
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| 185 | Director in carrying out their duties | | | | |
| 186 | | | | | |
| 187 | | ciate Regional Medical Director may perform the functions of the | | | |
| 188 | Regional Medical Director as delegated in writing and after submission of | | | | |
| 189 | such delegation to the Office of EMS | | | | |
| 190 | | | | | |
| 191 | AUTHORITY: 32 M.R | .S., Chapter 2-B. | | | |
| 192 | | | | | |
| 193 | EFFECTIVE DATE: | July 3, 1978 (EMERGENCY) | | | |
| 194 | | | | | |
| 195 | AMENDED: | April 1, 1982 | | | |
| 196 | | December 25, 1982 - Sec. 2.31, 3131, 6.311, 6.63 and 6.73 | | | |
| 197 | | January 1, 1984 - Sec. 1, 2, 3, 5, 6, 8.32, 10.2, 10.3, 11.1066, 11.1067 | | | |
| 198 | | April 30, 1985 - Sec. 1, 2.846.222, 6.332, 9.313, 8.3216 and 9.11 | | | |
| 199 | | January 1, 1986 - Sec. 1, 6. 8.15, 8.2, 8.3, 8.4 and 11.103 | | | |
| 200 | | September 1, 1986 | | | |
| 201 | | August 25, 1987 - Sec. 5, 6.011 and 12 (added) | | | |
| 202 | | July 1, 1988 | | | |
| 203 | | March 4, 1992 | | | |
| 204 | | September 1, 1996 | | | |
| 205 | | September 1, 1990 | | | |
| 206 | EFFECTIVE DATE (ELECTRONIC CONVERSION): | | | | |
| 207 | EFFECTIVE DATE (ELECTRON | July 1, 2000 | | | |
| 208 | | July 1, 2000 | | | |
| 209 | DEDEALED AND DEDLACED. | | | | |
| | REPEALED AND REPLACED: | L.L. 1 2000 | | | |
| 210 | | July 1, 2000 | | | |
| 211 | | July 1, 2003 | | | |
| 212 | | October 1, 2009 | | | |
| 213 | | May 1, 2013 | | | |
| 214 | | January 10, 2021 | | | |
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| 220 | 163—BUREAU OF EME | RGENCY MEDICAL SERVICES (MAINE EMS) | | | |
| 221 | - | TO THE CLOSE AND THE CLOSE AND CONTROL OF | | | |
| 222 | CHAPTER 15: MAINE EN | AS REGIONS AND REGIONAL COUNCILS | | | |
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| 224 | 1. Comp | osition of Councils | | | |
| 225 | | | | | |
| 226 | | least, provide adequate representation for ambulance and rescue | | | |
| 227 | services, emergency physicians and nurses, each hospital, and the general public. A Regional | | | | |
| 228 | | adequately represent each major geographical part of its | | | |
| 229 | region. Regional Councils will identify and publicize names of representatives and their | | | | |

constituencies in order that constituents are able to effectively communicate with their 230 231 representatives. 232 233 Regional Council Activities 234 235 Only one Regional Council shall be recognized in any region. Any 236 organization proposing to serve, as a Regional Council must state this intention in 237 writing delivered to Maine EMS no later than 120 days before the start of the 238 fiscal year in which the contract is to be written. The Board will select the 239 organization which best demonstrates an ability to carry out those functions 240 specified in the service contract for the upcoming fiscal year. The Board will then 241 negotiate a price for carrying out the service contract with the organization 242 selected to be the Regional Council. The Board may elect to enter into a 2 year 243 contract consistent with the biennial budget process. 244 245 Regional Council activities specified in the service contract will include 246 but are not limited to those activities listed in 32 M.R.S., Chapter 2-B §89. By 247 December 31, following the year the contract was in effect, each Regional 248 Council will submit to Maine EMS a final report for the previous fiscal year 249 detailing its performance in carrying out the provisions of the service contract, 250 and which includes an independently prepared financial report. Maine EMS will 251 use financial reports for the purpose of monitoring the general activities of each 252 Council and for setting reasonable prices for future service contracts. Because 253 Regional Councils depend largely on Maine EMS for operational revenue, Maine 254 EMS will endeavor to maintain a schedule of payments to the Region that provides operational funds in advance of the period in which the funds will be 255 256 employed. Any regional personnel handling the disbursement of its funds shall be 257 bonded at a minimum of \$10,000. 258 259 Designation of Regions 260 The Board shall delineate regions within the State in accordance 261 262 with 32 M.R.S. Chapter 2-B §89(1). 263 264 Service Affiliation with Regions 265 266 A. Services that respond only to cities, towns, townships, and 267 territories within a single region will be affiliated with that region. 268 269 B. Services that respond to cities, towns, townships and territories in 270 more than one region will be affiliated with the region as determined 271 by the initial hospital destination of a simple majority of the patients 272 treated by the service as defined in §3.1 of this chapter. 273 274 Changes to Service affiliation within Regional designations are 275 made by Maine EMS when they are approved by the Board and published

in a document distributed to all service chiefs. The Board will seek advice from the services and Regional Councils affected regarding any disruption of patient service or EMS system caused by the proposed change in designation.

4. Medical Control and Delegation

- 1. Regional Medical Directors acting within the provision of these Rules and 32 M.R.S. Chapter 2-B are agents of Maine EMS. Regional Medical Directors may designate, with the approval of Maine EMS, licensed and qualified physicians to serve as their assistants in carrying out these provisions. These assistants will similarly be considered agents of Maine EMS.
- 2. A Regional Medical Director may impose conditions upon a licensee's ability to practice in that Director's region with the licensee's consent. In all cases, the Regional Medical Director must inform Maine EMS of this action as soon as possible and forward to Maine EMS a copy of the executed agreement. If a Regional Medical Director wishes to take action to modify a licensee's ability to practice at his or her license level or modify approval to practice and the licensee does not consent to the modification, the Regional Medical Director will immediately inform Maine EMS.