

20250109- Community-Paramedicine-Minutes

Thursday, January 9, 2025
09:30 AM



Meeting Subject: CP Committee Meeting

Meeting Date: 1/09/2025 at 9:30 am

Location: Zoom

<https://mainestate.zoom.us/j/86737150819?pwd=055VbywCMWd5zANoYXXdYCY77cjH2fZ.1>

“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 clinicians. All members of this committee should strive to promote the core values of excellence, support, collaboration, and integrity. In serving on this committee, we commit to serve the respective clinicians, communities, and residents of the jurisdictions that we represent.”

- 1) Call To Order
 - a) Dr. Lowry called the meeting to order at 9:33 am
- 2) Mission Statement
 - a) Dr. Lowry read the mission statement.
- 3) Attendance
- 4) Modifications to the agenda.
- 5) Approval of Meeting Minutes
 - a) December 12, 2024
 - b) Motion for approval by Josh, seconded by Bridget
 - c) Approval by all
- 6) Office update – Soliana
 - a) Staff Changes
 - i) Soliana discussed staff changes including new hire Erin as the Maine EMS office associate, Anthony Roberts has resigned, Regional coordinator interviews are occurring, an offer has been made for the education coordinator

b) RFA

- i) #202412213 is currently live, questions are due January 16th and applications are due February 10th, 2025.
- ii) Chapter 19 is with the secretary of state's office for publication.

7) Old Business

a) Pediatric Next Steps

- i) Work with pediatric providers to develop a one-hour CEH on needs
- ii) Support CEH development for weight checks/blood draws newborn specific
 - (1) Josh – discussed applying for a pediatric asthma program
 - (a) Has developed a CEH for an asthmatic pediatric program
 - (b) Looking to connect into the CP CEH program potentially
 - (2) Ellen – it would be great to engage the pediatric provider community as well
 - (a) Could do a collaborative of learning from the pediatric community and teach about CP as well
 - (3) Dr. Lowry – reach out to EMSC about connections for pediatric community-needed care
 - (4) Dennis Russell discussed the importance of clinical access. Partnering with a local pediatrician's office could achieve this.
 - (a) Providers could do well visits etc. in a pediatrician's office
 - (5) Committee discussed connecting w/ MDPB pediatric rep to support these efforts
 - (6) Are there opportunities to partner with existing agencies that currently do this?
 - (7) Committee asked: Who coordinates the visiting nurse program?
 - (a) Maine CDC runs that program/ operates
 - (b) CradleME program oversees this program

b) Physician Onboarding Materials

i) Review Packet

- (1) Committee discussed separating the job description from FAQ and Informational sheet.
- (2) Discussed changing FAQ from all caps
- (3) Committee discussed publishing documents on website and sending to CP specific agencies
- (4) Committee is in final agreement on this version

c) CP CEH Program

- i) Committee discussed setting up a committee run, virtual CEH program to align with new CP education standards
 - ii) In February – there will be a Falls Prevention CEH offered four times working with an OT doctoral student
 - iii) Need volunteers primarily for March – May
 - iv) Discussed developing a sign-up sheet, so that committee members can select month's they want to help stand up a CEH offering
- 8) Board Directive
 - i) MIH/Service Area- Standing Item
- 9) New Business
 - a) Where do we want to go next year?
 - i) Goals and objectives
 - ii) Ellen – discussed having a marketing objective
 - (1) Try to reignite the enthusiasm around CP
 - iii) Economic data on CP overall
 - (1) Can we show that there is a benefit financially to do this type of program?
 - (2) Can we do better data analysis or pull more data/better data
 - (a) How do individuals pull that?
 - (3) Continue to focus on education over the next year
 - b) Department Aligned Initiative (DAI) – Heather Pelletier (10:45)
 - i) Heather discussed that OMS has an accountable communities (AC) model
 - ii) The DAI is an opportunity for healthcare systems or AC entities/related providers
 - iii) These entities execute a contract for shared savings
 - (1) They earn this by becoming responsible for the total cost of care delivered to patients through utilization for primary care services
 - (2) Locating, coordinating and monitoring of members
 - (3) Maine Health, NLH, Kennebec Regional Health Alliance (Maine General associated practices), and CCPM Community Care Partnership of Maine are AC entities
 - iv) They will have the opportunity to complete a CP DAI in the upcoming contract.
- 10) Action Items for Next Meeting
 - a) Soliana will implement changes to the onboarding materials.
 - b) Committee members will sign up for CEH spots

11) Next Meeting

a) February 13, 2025

b) Motion to adjourn at 11:00 am

Attendance

Member	Position	Present Y/N
Bruce Lowry, MD	Medical Direction and Practices Board Member	Y
Raymond Howard, MD	Community Paramedicine Program Medical Director	N
Bridget Rauscher	Municipal EMS Community Paramedicine Program	Y
Joshua Pobrislo	Non-Municipal Community Paramedicine Program	Y
Dennis Russell	EMS Training Center	Y
Cory Morse	Hospital-Based EMS Community Paramedicine Program	Y
Vacant	College / University	N/A
Charlie Mock	At-large Community Paramedicine Clinician	N
Walter Reed	At-large Community Paramedicine Clinician	Y
Ellen McFarland	At-large	Y
Daniel Svenson	At-large	Y
Nicole Burke	Home Health	N
Shauna McElrath, DO	Hospice/ Palliative Care	Y
Jonnathan Busko, MD	Hospital	Y