



JANET T. MILLS
GOVERNOR

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



MICHAEL SAUSCHUCK
COMMISSIONER

J. SAM HURLEY
DIRECTOR

BOARD OF EMS MEETING
FEBRUARY 5, 2020
9:30 AM
DE CHAMPLAIN CONFERENCE ROOM
MINUTES (DRAFT)

Members Present: Joe Kellner (Chair), Brent Libby (Chair-Elect), Brad Chicoine, Joe Conley, Amy Drinkwater, Judy Gerrish, John Martel, MD, Julie Ontengco, DNP, Dennis Russell, Steve Smith, Nate Allen, Tim Beals, Heidi Cote, Scott Susi, Matt Sholl, MD (ex-officio), Kate Zimmerman, DO (ex-officio)

Staff: Commissioner Sauschuck, Christopher Azevedo, Sam Hurley, Marc Minkler, Jason Oko, Melissa Adams, Jessica Ricciardelli, Katie Johnson (Assistant Attorney General)

Stakeholders: Jim MacDonnell, Don Sheets, Eric Wellman, Jay Bradshaw, Chris Connor, Debbie Morgan, Joanne Lebrun, Robert Russell, Nathan Yerxa, Sally Taylor, L'easa Blaylock

1. Introductions

2. Disclosures of Conflicts of Interest

Mr. Kellner (Chair) discloses that he is now the financial officer for LifeFlight.

Mr. Kellner (Chair) discloses that he works for the service, Northern Light Health, who is requesting a waiver. He will be recusing himself to present the waiver.

Mr. Beals will recuse himself from Investigation #17-011.

3. Public Comments

Mr Keller requested that public comment pertaining to spinal immobilization be held until we get to that agenda item. There were no other public comments.

4. Minutes

Dr. Zimmerman requested that under the Trauma Advisory Committee Report, the name of the trauma surgeon on page seven should be changed to Ian Neilson.

Mrs. Johnson stated that Investigations Cases #19-064 & 19-065 need to be amended. Mrs. Johnson also noticed that under the informal reviews, some of the

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conviction dates do not match her records. Mrs. Johnson will work with MEMS staff to make the needed corrections.

*MOTION: To accept the minutes of the December 4, 2019 meeting as amended.
Made by: Russell, Seconded by: Beals, Vote: Unanimous*

5. Directors Report

a. Staffing

MEMS will be conducting interviews on February 14th. We have four candidates we will be interviewing for the Licensing Agent position and one for the Data position.

b. Welcome Packet

Everyone on the Board has received a copy of the draft welcome letter. The cost for each packet is about \$1.50 each.

*MOTION: To accept welcome letter and packet as presented by Mr. Hurley.
Made by: Russell, Seconded by: Susi, Vote: Unanimous*

c. Budget

Based on the information we have now, MEMS is spending appropriately based on our budget allotment. Mr. Hurley has worked with the Commissioner to put forth a financial order to secure financing for the strategic planner to work with the Board.

d. Legislation

LD 1996- *“An Act Concerning the Reporting of Health Care Information to the Emergency Medical Services’ Board”*

MEMS worked collaboratively with DHHS and the Maine Hospital Association to come up with mutually agreeable language that was amenable to all parties. Unfortunately, we will not have access to data of people that do not participate with HIN at this time. However, the committee did seem amenable to revisiting this once we understand what data we need outside of HIN.

LD 2025- *“An Act to Authorize Emergency Medical Services Personnel to Provide Treatment within Their Scope of Practice in a Hospital Setting with the Permission of the Hospital”*

An amendment was proposed that was adopted by the Committee and unanimously accepted. In summary, it states that our provisions don't prohibit anyone from working in a hospital if they are delegated by the hospital and the provider is allowed to do so with the permission of the hospital.

LD 2050- *“An Act to Establish the Central Aroostook County Emergency Medical Services Authority”*

MEMS is in support of this bill with some caveats. We are proposing that they consider technical guidance and assistance. This can come through the Regions, MEMS office or whomever they hire as their EMS director. We are also proposing that they conduct an assessment in their community to identify what

they need vs. what they can afford so they may better understand what they're capable of delivering. Finally, we are requesting that they develop a comprehensive EMS plan for their community.

LD 2042- "Resolve, To Allow the Department of Public Safety to Transfer Certain Property to the LifeFlight Foundation"

In 2004 there were grant funds put into place to buy equipment through LifeFlight that was used to train providers throughout the state. The equipment was put on a depreciation cycle. Currently, MEMS is doing the financial accounting for the depreciation of the LifeFlight equipment. It makes sense for MEMS to return the supplies to LifeFlight and let them do their own financial accounting within their own shop. Therefore, we have proposed a resolution to empower us to transfer their supplies back to them.

e. Strategic Planning

MEMS will begin the RFP process within the next couple weeks for the Strategic Planner that will be working with the Board.

f. Committee Updates

Exam Committee- Chris Azevedo

The Exam Committee, over the last two months, has been discussing a plan of action regarding the NREMT actions of dropping the seated/supine immobilization skills from the AEMT PSE. The Committee is looking at ways to proceed with verifying candidate competency and ways to improve on what we do in a more valid manor.

Education Committee- Chris Azevedo

The Education Committee is reviewing committee policies for filling vacancies. We are currently in the process of filling two vacancies. We are also working with the MDBP on protocol updates which is in the initial stages for the cycle due in 2021. We have several goals on the radar including a review of PIFT and AVOC programs along with the instructor components associated with them. The Committee is also working on an internal review of policies and procedures.

QI Committee- Jason Oko

The QI Committee has been working on the newsletters. This last newsletter is a comprehensive review of our systems performance based on the EMS related Coverdell Stroke Measures. With this newsletter we've created a dashboard within MEFIRS so you can see average on scene time for your agency and the average on scene time for every incident for your agency over the last 90 days. You will also be able to see the percentage of incidents where there is a missing blood glucose and every time they've documented a stroke alert to a receiving facility. There is also a link to all the incidents that are missing that stroke alert for QI systems to use for review.

Ops Committee- Sam Hurley

We are working on drafting the supplement for Maine EMS week. We have secured the Hall of Flags for the awards ceremony and the permit for the wreath laying ceremony at the EMS memorial. Mr. Hurley asked that everyone be available for the ceremony May 19th, 2020 at the Hall of Flags, he requested that everyone be there no later than 12:30. We have reached out to the Governor's office with the hope that she will be able to attend and present the Governors award if we are going to be presenting one.

The Committee is working on a list of items that are in the rules as well as on the protocol's equipment list. MEMS has an approved list on the website, however we are trying to establish a more comprehensive list that can be found in a central location. The Committee will also be changing the inspection forms for ambulance equipment checklists. Once the updates have been made, we will be circulating the list which will be the new standard. The Committee has agreed that on the bottom of the inspection form we should also have a list of the optional equipment listed in protocols but not required by the rules.

The Committee discussed hospital recognition as part of EMSC as we think it is important to make sure hospitals are recognized for pediatric readiness.

The Committee also talked about surveys that have been circulated over the past few years, including the most recent survey regarding workforce stress. We are still gathering data on that to better understand stress so that we can help our system.

EMSC- Marc Minkler

The EMSC Advisory Committee met on Jan 23rd, the main topic of discussion was regarding performance measures focusing on pediatric preparedness recognition of emergency departments in Maine. We will be joining the other New England states in modeling after the Connecticut "Always Ready for Children" recognition program. There are three levels of recognition and the specifics are being developed for distribution and comments. The Goal is to include MHA and Maine chapters of ENA, ACEP and AAP early on.

Mr. Minkler has been working with Maine CDC and DHHS around perinatal systems of care. This is a new program where they're looking at the impact of the lack of resources around newborn care delivery across the state with emergency departments and hospitals that have reduced services. We are looking how we can best facilitate improving access and care in Maine.

There is a pediatric conference in Waltham Massachusetts on March 9th There will be internationally renowned presenters and there are still about 40 spots available.

Trauma Committee- Dr. Zimmerman

We are reviewing our current membership roster which we will present to the board in May.

The Committee continues to work with outreach to the rural hospitals: re Mild Traumatic Brain Injury Guideline. Rural Trauma team's visit to Memorial Hospital in New Hampshire is being rescheduled due to provider availability. We will also be looking at outreach to hospitals in Aroostook County.

We are continuing to work on the revision of the Trauma Plan which will be finalized in the Summer or Fall.

MDPB is starting protocol review process, they have asked the Committee to look to see if there are areas in the protocol where they might make recommendations.

Community Paramedicine Committee- Jason Oko

The Committee did not meet in January; however, we are currently on the new schedule which is the second Thursday of every month with the next meeting on February 13th, 2020 at 9:30 AM. In January we put several new validation rules in place within MEFIRS for CP services with regards to the worksheets that I have been working on with Mr. Russell. We will have to start reviewing the data that are receiving from the worksheets. We have looked at education guidelines that have been provided by Mr. Russell and some guidelines for CP services in terms of what they are doing on CP calls.

EMD Committee- Melissa Adams

The EMD Committee met in January. We have rescheduled the regular meetings to quarterly on the third Thursday of the month (April, July, October) at 9:30. The eleven-person membership is now at only five members, placing membership acquisition as the highest immediate priority. The Committee is currently reviewing and editing a guide for membership qualifications and the application process. We are hoping to post an advertisement for the open positions by mid-February with an application deadline of March 22nd. We will be holding interviews at the next EMD meeting on April 16th.

6. Investigations Committee- Melissa Adams

MOTION: To accept minutes of the January 29th meeting.

Made by: Beals, Seconded by Gerrish, Vote: Unanimous

a. Informal Review of Provider Applications

Summary: On an application for an EMT license, the applicant disclosed a conviction in 2005 for Theft. The applicant's criminal history contained a second

theft conviction in 2006, and a third Theft conviction along with convictions of Violating a Protection from Harassment Order and False Public Alarm in 2007.

The Committee recommended to issue the license to the applicant and dismiss the complaint contingent upon the licensee supplying three (3) professional letters of reference to the EMS office by Tuesday, February 4, 2020.

MOTION: To accept the committee's recommendation.

Made by: Russell, Seconded by: Drinkwater, Vote: Unanimous

b. Disciplinary Cases

Case #19-071 & 19-067

These cases were heard together as the individual present was representing both Licensed EMD Centers for allowing the unlicensed practice of EMD.

The Committee recommended to table these cases for the March Board meeting.

MOTION: To accept the committee's recommendation.

Made by: Russell, Seconded by Ontengco, Vote: Unanimous

Case #17-011 Presented by Mr. Oko

Beals recuses himself from this discussion.

Summary: This was a continuation of an investigation for an applicant for renewal of their AEMT license that had several convictions for OUI as well as violating the conditions of release and one warrant for his arrest for failing to appear in court to face his charges.

The Committee made a recommendation to offer two options. Option 1 is to issue the applicants license pending the submission of proof of completion of the DEEP Program showing no additional recommendation for counseling. Option 2 was to table the decision if the recommendation from DEEP included additional counseling.

The last decision on this case was made by the Board at the August 1, 2018 meeting to table the decision on this case to the next meeting.

The licensee went to DEEP counseling and they suggested more counseling. In December of 2019 we received the final paperwork from his counseling with no recommendation for further counseling.

MOTION: To accept the committee's recommendation with the addition of a letter of guidance to stay on file for three years and to grant the licensees AEMT renewal.

Made by: Libby, Seconded by: Russell, Vote: 13 Approvals, 1 abstention

The Investigations Committee has rescheduled regular meetings to the fourth Wednesday of the month at 9:30 effective January 2020.

7. Medical Director Report- Matt Sholl, MD

a. MDPB

The MDPB has been continuing to work on protocols and issuing the FAQ's. We have been debriefing the protocol rollout to improve the process for 2021. Many thanks to Chris Azevedo, Stephanie Cordwell, and Brian Chamberlin for meeting together to try to synchronize the Education Committee and the MDPB.

MDPB is looking at 2021 protocol updates. We asked MDPB member Seth Ritter to reflect with the group on the National EMS Scope of Practice changes that were previously released.

Death with Dignity bill was passed and went into effect in September. The bill does not address final steps in patient care. The 2021 protocols will be addressing the final steps in patient care to provide some guidance to EMS providers who get these types of calls.

We have been tracking the Coronavirus (2019-nCoV). Director Hurley has been keeping in contact with the Maine CDC. We ask everyone to stay abreast of the information and work with us as we try to keep everyone up to date as much as possible.

Dr. Sholl has had a few meetings with the Medical Director of the CARES program who was excited to hear about LD 1996

PIFT protocols continue to be updated with Dr. Tinley however, the January meeting needed to be rescheduled.

Northern New England Resuscitation Academy will be meeting again May 28th and 29th. Dr. Sholl thanked Sally Taylor and Chris Azevedo for helping organize the high-performance CPR stations. Dr. Sholl also thanks Dr. Zimmerman who has assumed the leadership role and has been handling the logistics for the event

8. Old Business

Mr. Beals requests to take spinal immobilization (Seated/Supine) out of order. Mr. Kellner received a consensus from the board to do so.

a. Spinal Immobilization (Seated/Supine)

Mr. Azevedo handed out a proposal that was worked on by MEMS as well as the Medical Director and the Exam Committee.

Public Comments:

Eric Wellman (*Program Director at Southern Maine Community College*)- Expressed support in taking the two stations off of the test because the amount of time spent in the classroom is significant, whereas the usage of the skills is low. Spinal motion restriction rule out/rule in should be taught and verified, however, having them master KED to enter the field should not be a requirement. Sally Taylor- Expressed support in developing a portfolio base for these two skills.

Dr. Sholl- Supports the portfolio approach that MEMS is proposing, however he expressed concern about how we are going to ensure that these skills are still being taught and verified.

Joanne Lebrun- Expressed support with the portfolio approach that MEMS is proposing and suggested that spinal mobilization skills are not only an issue with new providers, but with veteran providers as well.

MOTION: To accept the state recommendation to transition to portfolio approach for spinal motion restriction and for programs that currently have a portfolio approach approved by MEMS to proceed immediately with all other programs transitioning by January 2021

Made by: Amy Drinkwater; seconded by: Libby, Vote: Unanimous

The Exam Committee will meet to discuss a timeline for implementation of the portfolio approach.

b. Rules Comments

Rules Committee met three times over the last month to go through the public comments to provide a response to all the public comments that were received and to decide on what we are going to do in the rules based on the comments.

We are looking for the board to approve the responses that the rules subcommittee has provided to all the public comments received so that we can go back out to public comment because the changes are substantive enough to require us to go back out to public comment.

MOTION: To approve changes made by the Rules Committee and send them back out to public comment.

Made by: Russell, Seconded by: Conley, Vote Unanimous

c. Committee Appointments Process

MOTION: To table Committee Appointment Process until March Board Meeting.

Made by: Conley, Seconded by Libby Vote: Unanimous

d. Biospatial

MEMS has spoken with Biospatial regarding working on a roadmap for the rollout. They highly recommend a phase pilot project to figure out permission sets and see where we are before we move forward. We systematically identified five services for Biospatial to give permissions. The two training days we have set are March 9th and 10th. By the April Board meeting we should be able to provide a timeline of the full rollout.

9. New Business

a. Data Committee Proposal

A proposal for how to select membership for the Data Committee was presented.

MOTION: To approve proposal as submitted.

Made by: Libby, Seconded by: Smith Vote: Unanimous

b. Northern Light Waiver Request

Mr. Kellner recuses himself from the discussion and votes on this matter and presents the waiver request on behalf of Northern Light.

Mayo Regional Hospital is merging into MRH Corp., a wholly owned subsidiary of Northern light Health, and will be doing business as Northern Light Mayo Hospital. MRH Corp., d/b/a Northern Light Mayo Hospital is requesting a 24-month waiver to allow for the time and investment to rebrand ten ambulances.

The Board went through the waiver requirement, which was presented by Mr. Libby (Chair-Elect) and made the following findings.

- 1) Whether the person seeking the waiver took reasonable steps to ascertain the rule and comply with it. Finding: Yes, which supports the waiver request
- 2) Whether the person seeking the waiver was given inaccurate information by an agent or employee of the State EMS Program. Finding: No, which supports the waiver request.
- 3) Whether the person seeking the waiver, or any other individual or group would be significantly injured or harmed if the rule is not waived. Finding: Yes, which supports the waiver request.
- 4) Would the waiver of the rule in this particular case pose a health or safety risk to the public at large, or a particular individual or community? No. Does this weigh in favor of granting a waiver? Yes.
- 5) Would waiver of the rule in this particular case establish a precedent that would unduly hinder the Board or Office of EMS in its administration of Maine's EMS system? No Does this weigh in favor of granting a waiver? Yes

The Board states that extraordinary circumstances exist as they have found the above factors weigh in favor of granting the waiver.

Mr. Libby asked the Board for a vote on the waiver: Vote: Unanimous, (Mr. Kellner, abstained) Vote Carries; waiver will be granted.

c. Disclaimer- Conflicts

Mr. Hurley states that after attending a wide variety of meetings, he sees that there may be a benefit at all meetings, Committee and Board, to remind ourselves of what our mission is and what we are here for. He is requesting for the Board to pass a resolution that at the beginning of every meeting we read a phrase to remind all members of the task.

“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 to all providers. All members of this Board/Committee should strive to promote the core values of excellence, support, collaboration and integrity. In serving on this Board/Committee, we will commit to serving respective providers, communities and residents of the jurisdictions we represent.”

MOTION: To adopt the resolution that all board and committee chairs recite this statement at the beginning of every meeting.

Made by: Libby, Seconded by Ontengco Vote: Unanimous

10. Other

a. Items for next meeting agenda

- i. Medical Director Requirements
- ii. Moving PSE to portfolio approach
- iii. Committee Appointments
- iv. IFT Committee
- v. Disciplinary Matrices

b. Next meeting date (March 4, 2020 @ 9:30 AM)

11. Adjourn

MOTION: To Adjourn.

Made by: Gerrish, Seconded by: Conley, Vote: Unanimous