MAINE EMS STAFF UPDATE ***EMS**





OVERVIEW

This publication is intended to provide members of the Board and interested parties insight into the work of the Maine Bureau of Emergency Medical Services office in the previous month. This publication is not anticipated to be exhaustive, but instead a high-level overview of the work that has taken place.

It should serve as a jumping point for conversations and questions from the Board regarding the ongoing work that is being performed throughout the state.

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A MESSAGE FROM THE DIRECTOR

Greetings all!

We have wrapped up our part of the legislative session with nearly 30 different bills with a nexus to Maine EMS. It was a very busy session, and I feel we had good results overall – both in building relationships with Representatives and Senators, and in getting work done. Both of our department bills made it through committee, and LD5 to formalize adoption of the Portfolio standard was the first bill to make it through the full session.

I am recently back from NASEMSO where I was able to meet and brainstorm with many of the Directors from our region and across the US. Challenges for many include uncertainty around federal funding for programs, how to implement and track EMS whole blood initiatives and more work on defining EMS as primarily a Healthcare entity.

The EMS Awards were, I feel, a great success, well attended, and well-coordinated. I want to again share a huge thank you to Erin Ludwig, Jason Oko, and our staff and the Board (Amy, and Dr. Sholl for speaking, too!) for their support and help with nominees.

As a final update we are planning to hold a digital forum for EMS leaders across the state, most likely in August or September, to allow us to share info, collect voices, look at needs, and potentially consider draft legislation.

-Wil





RULES COMMITTEE

The Maine EMS Rules Subcommittee has started review and consideration of a rule to establish a new chapter addressing the Maine EMS Scope of Practice for EMS clinicians.

LICENSURE & INVESTIGATIONS

Currently, the Licensing Team:

- Has 15 services that they either have applications already in progress for, or that they are anticipating applications from;
- Is working to update the vehicle application form to encourage submission to the licensure email inbox rather than the use of fax;
- Has 72 open, docketed cases for investigation. To date, 56 cases have been closed this year; and
- Is working on updating and revising the clinical practice matrix.

Additionally, Maine EMS has resolved the majority of the Naloxone-leave-behindnon-compliance cases using the delegated authority order approved by the Board.

Finally, the licensure team is currently undergoing a transition: Senior Licensing Agent Melissa Adams has accepted a new position within Maine EMS as the Regional Manager for Region 2. Congratulations, Melissa!

EMERGENCY MEDICAL DISPATCH

Twenty quality assurance personnel from 17 of Maine's 25 Emergency Medical Dispatch (EMD) Centers attended the Spring Quality Review Session in Augusta in April.

At the Maine NENA Conference in May, Maine EMS recognized 57 EMDs with Phoenix Awards for their role in helping 60 patients survive an out-of-hospital cardiac arrest.

As of May 20, 2025, all new and renewal EMD licenses require the applicant to have completed the certificate training for Protocol 41: First Party Caller in Crisis. This training is a requirement for EMD Centers to turn on the Protocol and supports our goal of 100% statewide implementation by July 31, 2025.

There are several vacancies on the EMD Committee we are looking to fill and are accepting applications through the Maine EMS Committee Application Form on our website until noon on July 3, 2025.

COMMUNITY PARAMEDICINE (CP)

At its May meeting, the CP Committee discussed Chapter 19 changes and rollout as well as upcoming educational opportunities for CP education. United Training Center Lewiston and NMCC both plan to offer courses in the Fall. United Technologies Center also plans to have CP educational opportunities. The CP Committee will continue to focus on supporting agencies with the rules transition and has set up a monthly CEH offering to support access to CP CEHs. The most recent class was held on May 27, 2025 and focused on medications that may be seen in the CP setting. CP coordinator Soliana Goldrich continues to work with five agencies on the EMS Supplement grant, focusing on recruitment, retention, and financial viability.



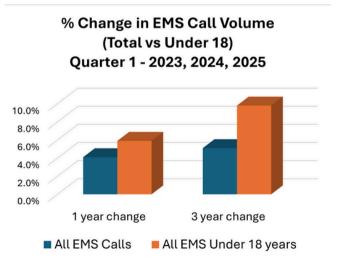
EMS FOR CHILDREN (EMSC)

The Maine EMSC Program's June update to the Maine EMS Board shares notable recent achievements and updates including the appointment of Marc Minkler to the NEMSQA Measure Development Panel as a pediatric and EMS subject matter expert, recently advocating and implementation of pediatric patient inclusion in national tourniquet usage measure. Additionally, Marc:

- Was selected as co-chair of the National EMS Pediatric Skills competency workgroup;
- Continued as co-chair of the Perinatal Quality Collaborative for Maine;
- Attended the NASEMSO national conference in Grand Rapids, MI as the Maine State Pediatric Representative and current officer/immediate past chair of the US Pediatric Emergency Care Council;
- Was invited to and attended the NREMT Paramedic Clinical Judgement Review Panel in Columbus, OH;
- Was invited to speak at the upcoming AAP Pediatric Trauma Informed Care Summit;
- Is an invited speaker at the Perinatal Quality Collaborative annual conference on June 13;
- Is completing annual performance review and budget analysis/reporting to HRSA;
- Has added three new hospitals to the Always Ready for Children recognition program (for a total of eight hospitals in Maine);
- Is managing the entire Maine State EMS website and social media platform; and
- Is working with multiple agencies and hospitals with OB closures.

The EMSC program is facing several continuing challenges, including:

Those around pediatric EMS call volumes. In the first quarter of 2025, we have seen an increase of 6% in calls for people under 18, compared to 2024. In the first quarter over the past 3 years, an increase of 10% for people under 18 occurred (compared to an overall all ages EMS call volume increase of 4% from 2024 to 2025 and 5% over the past 3 years);



- · Accessing transport and critical care for pediatric and OB IFTs; and
- Funding (EMSC is currently only funded to 45% through the federal HRSA grant).

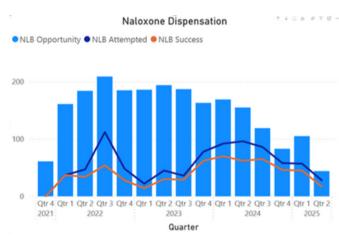
SYSTEMS OF CARE

The identification, award creation, and distribution of the Phoenix Awards for clinicians was completed. Dispatchers were presented with their awards at the recent National Emergency Number Association annual conference. Work moves forward on CARES as review, entry, and follow up continues for 2025, including following up with services and leadership on out-of-hospital cardiac management, documentation, and improvement strategies. The Trauma Advisory Committee is in the nomination process for a new chair, and the focus has been on updating the Statewide Trauma Plan. The Maine Stroke Alliance is currently treading water as many members have stepped down and the unknown federal funding cuts are creating significant uncertainty. Ashley Moody attended the NASEMSO conference in Michigan with other Maine EMS staff. The national push in the world of trauma is field blood and the large influx of injured patient preparedness.

SUD RESPONSE

This round of Care Ambassadors recently got the green light to start outreaching to departments. We have six ambassadors covering Oxford, Franklin, Waldo, Knox, Lincoln, Cumberland, Androscoggin, York, Penobscot, Washington, and Hancock counties. Education for this round of Ambassadors is focused on stigma, bias, compassion fatigue, and utilizing and accessing the OPTIONS referral pathway as well as other local resources. With our team down to one person and the uncertainty of our grant funding being renewed after the fall, we are working on restructuring our delivery of services to focus more on resources that are already available across the state, and putting a hold on long-term grant funded projects that may not be sustainable at this time. Additionally, though our team will not be presenting at this year's Opioid Summit, we are working with the Office of Behavioral Health on their presentation about the OPTIONS program to speak to some of the work that our team has been doing.

Naloxone dispensation is seeing an increase in the percentage of attempts for opportunities but declining numbers overall. The decline appears to be in part due to a reduction in overdoses and in part a result of clinicians documenting overdoses as types of service requested of public assistance, standby, etc. that bypass some of the validation within a report that has a patient encounter.



EMS Patient encounters by clinicians who have not completed the naloxone dispensation training continues to decrease. Thus far in 2025 there have been:

- 5310 patient encounters by paramedics who have not completed the training;
- 2325 patient encounters by AEMTs who have not completed the training;
- 9043 patient encounters by EMTs who have not completed the training; and
- 243 patient encounters by EMRs who have not completed the training.

OPTIONS Referral Attempts
OPTIONS Referral Successes

710
3832
0
3832

So far in 2025, The OPTIONS Referral program has offered referrals to 710 of 3,832 patients, with 74 referrals being made.

EMS CONNECTME

EMS ConnectME has concluded its pilot phase with Bethel Rescue, North Haven Ambulance, and Shapleigh Rescue implementing the program. In total, 30 Learners have been enrolled, with 8 completing a level, 3 obtaining EMS licensure, and 3 getting hired by their agency. Since the end of the pilot phase, Sacopee Rescue has begun program activities, and other sites are in the process of starting up. Shapleigh Rescue terminated their program due to budget constraints.

Adaline Koskela, the first Level 2 Learner in the program, spoke about her experience at the EMS Memorial Ceremony on May 21st. Her chief, Dave Hanscom, received the EMS Excellence Award at the subsequent Awards Ceremony. EMS ConnectME is proud to have worked with both of these remarkable individuals, and looks forward to their future endeavors!

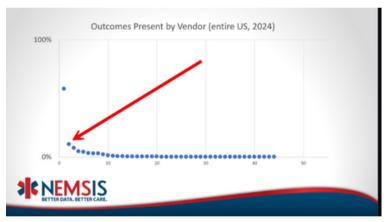
Coming soon: The EMS ConnectME Service and Mentor Trainings will soon be available on MEMSEd. These trainings are required for service members and Mentors at agencies running the program. Previous iterations of the training were taught in-person or via zoom, and we expect that offering them asynchronously on MEMSEd will increase access to agencies across Maine!



DATA & PREPAREDNESS

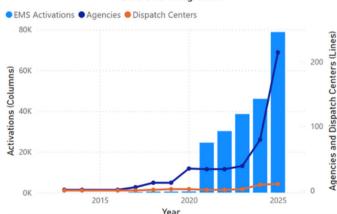
Outcome Data: Outcome data is now present for 37.42% of the records for patients transported to a hospital emergency department or a free-standing emergency department over the last thirty (30) days.

The arrow in the graph to the right indicates State of Maine EMS submissions to NEMSIS with outcome data in 2024.



CAD Integration: Maine EMS is funding the integration between CAD systems and MEFIRS.

EMS CAD Integration



Data Committee: Since being reformed the data committee has held two meetings, meeting every other month. Both meetings were successful in obtaining a quorum.

REGIONAL UPDATES

REGION ONE

Robert Glaspy has accepted the position of Regional Manager for Region One. So far in the position, he has:

- Facilitated discussions regarding methods to get the RAC up and running;
- Created and disseminated a survey that was sent out to all license holders in the region. Information from that survey was used to establish a recurring meeting date and time. The survey also allowed participants to voice their opinions and concerns;
- Participated in many discussions with agency leadership regarding issues with access to training and education; and
- Created a document that contains Core Elements, Key Programmatic Requirements, Provider Specific Requirements, a QA/QI Plan, a Research Plan, and an Education Plan for review by stakeholders that may be interested in entertaining the idea of a possible pilot project In light of the MOUD RFP funding being clawed back.

REGION THREE

The Region Three Manager position within Maine EMS has been accepted by Jason Oko, with the Data & Preparedness responsibilities having transitioned smoothly to Darren Davis.

Region Three has been engaged in several key initiatives. Notably, several clinicians from the region were represented at the Maine EMS Awards Ceremony and received awards for their outstanding contributions to the Maine EMS system.

Efforts are currently underway to re-establish and convene regional council meetings, a process that involves forming the council itself in accordance with Chapter 15 of the Maine EMS rules.

A significant ongoing project is the beta testing of the Al Assist feature within MEFIRS, in collaboration with ImageTrend. This innovative tool is designed to streamline documentation by allowing EMS clinicians to record approximately thirty seconds of audio. The Al then transcribes this audio to text, which clinicians can review and correct before the Al maps the information to relevant fields in the patient care report. Clinicians retain oversight, with the ability to verify and implement all Al-suggested changes or select only those they deem accurate. Furthermore, the Al Assist feature demonstrates promising capabilities in parsing data from uploaded images, successfully extracting information from driver's licenses, pill bottles, medication lists, and demographic forms. Several EMS agencies across the state are actively supporting the beta testing phase, including the Portland Fire Department, Bath Fire Department, Orono Fire Department, Bucksport Fire Department, Hampden Fire Department, and United Ambulance Service. These agencies have received training on the Al Assist tool and are providing valuable feedback to ImageTrend, contributing to the refinement and improvement of this technology for the broader EMS community.





EDUCATION & TRAINING

Maine EMS's new Education Coordinator, John DeArmond, has been in the position for three and a half months now. His work so far has included:

- Initial site visits with all Board-approved Maine EMS Licensed Training Centers, as well as various Maine EMS state stakeholders;
- Meetings with Brooks Ambulance, the University of New England, the University of Maine, Northern Lights Ambulance, and York County Emergency Management to establish initial licensing and the Maine EMS Institute;
- Attendance at the NASEMSO conference in Grand Rapids with colleagues;
- Appointment as the State of Maine EMS Educational Representative and participation in the EMR Student Minimum Competency (SMC) Committee. NASEMSO has approved SMC for EMTs, and we are exploring the possibility for EMT programs to be accredited;
- Beginning CoA accreditation review of Board-approved Paramedic programs, including those for:
 - EMCC
 - KVCC
 - NMCC
 - SMCC
- Exploring streamlining the CEH approval process, as well as initial and renewal processes for Instructor Coordinators in conjunction with the Education Committee; and
- Aiding in the facilitation of all eligible Licensed Training Centers applying for grant funding through the Sustainability grant program.



