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JOHN E. MORRIS
COMMISSIONER

JAY BRADSHAW
DIRECTOR

BOARD OF EMS MEETING
DECHAMPLAIN CONFERENCE ROOM
APRIL 1, 2015
9:30 AM

MINUTES - FINAL

Members Present: Jeff Rowe (chair), Mike Senecal (chair-elect), Matt Sholl, MD (ex-officio), Tim Beals, Joe Conley, Nate Contreras, Greg Coyne, Laura Downing, Judy Gerrish, Nancy Jackson, Paul Knowlton, Kalem Malcolm, John Martell, MD, Lori Metayer, Julie Ontengco, Percy Thibeault

Staff: Jay Bradshaw, Alan Leo, Heather McKenney, Jon Powers, Don Sheets, Drexell White

Office of Attorney General: Lauren LaRochelle, AAG

Regional Coordinators: Joanne LeBrun, Rick Petrie, Ben Zetterman

Guests: Dan Batsie, Myriah Porter

1. Introductions made.
2. Minutes
 - a) **MOTION: To approve the minutes of the February 4, 2014, meeting as amended. (Beals; second by Thibeault). Unanimous**
 - b) **MOTION: To amend and approve the minutes of August 6, 2014, to record Brian Stockdale as present. (Coyne; second by Thibeault). Unanimous**
3. Public Comments – none
4. Maine EMS Update
 - a) Budget – the biennial budget for EMS was unanimously approved by the Joint Standing Committee on Criminal Justice and Public Safety which adds to the current level of funding, two initiatives; general funding for the state EMS medical director in FY 17, and funding for an increase in Information Technology expenses. The budget will now go back to the Appropriations Committee for consideration.
 - b) Legislation – Two of the three Department-requested bills submitted on behalf of MEMS have had public hearings and Committee work sessions. LD 624 updates the statute to include the Trauma Committee as within the Department of Public Safety. LD 629 removes the limit on the number of Community Paramedicine pilot projects that the Board may approve. The bill as amended also removes the 3 year time limit, which will enable the Board to renew pilot projects if/when appropriate, and retains the requirement for primary care and emergency

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medicine medical direction. The latter was proposed for deletion from statute because it is already a requirement by the Board; however, it caused confusion among many who read the law and are unfamiliar with the Rules – and in the interest of reducing confusion and concern, keeping in statute seems appropriate. The Criminal Justice and Public Safety Committee also added an emergency preamble, which means the law will be effective when signed by the Governor.

Other bills being monitored by Maine EMS are listed in the Legislative Summary, which is sent out weekly, or more frequently when there are important updates.

- c) Community Paramedicine – The USM Muskie School continues its work to assess the impact of the CP pilot projects. They have contacted every service participating in the pilot project and will be using a template developed by MedStar EMS (Ft. Worth, TX) and the University of Pittsburgh Medical Center to estimate the cost savings of CP.

MEMS met with MaineCare to discuss using the current billing codes for non-transported patients for CP reimbursement.

- d) Operations Team – Topics discussed at the March 31, 2015, meeting included the annual EMS week newspaper insert, protocol education, patients who frequently use the EMS system, and updating the requirements for junior rescue services with a goal of having an updated draft available for review at the June 3, 2015, Board meeting.

5. Medical Director Report

MDPB – Dr. Sholl reported that the first phase of the 2015 protocol update has been completed and that educational modules will be available online at MEMSEd within a few days. This first phase, which will go into effect on July 1, 2015, includes the PEGASUS updates for pediatric patients, spine management for all patients, and intranasal naloxone administration by EMTs. Training for phase two will commence in September, with those changes effective December 1, 2015.

Don Sheets and Chris Paré have been working on an update to the Paramedic Interfacility Transfer (PIFT) program. PIFT is a part of the work being done by the Interfacility Transfer work group, which will review the updated PIFT material in a few weeks.

Dr. Sholl, Don Sheets, and Jay Bradshaw worked on a draft Interfacility/Critical Care Transport guide based upon the NH CCT protocol. The goal is to have a document much like the MDPB White Papers that will provide guidance, recommendations, and requirements for transferring patients between hospitals. The draft is now in review by the MDPB and will be shared with others after the initial revisions have been made.

QI Committee – the next statewide QI project will be on patient “no transports” and refusals. The committee will work on the notification letters and reporting tool, and present the packet for review/approval by the Board at the June meeting.

6. Old Business –

- a) Jay Bradshaw reported that because both Southern Maine EMS and Atlantic Partners EMS expressed an interest in being the designated council for Region 1, the modeling work group was reconfigured to include Board members without ties to either organization. The FY 16 scope of work and Request for Qualifications was distributed on March 30, along with the timetable for questions and answers. Proposals and work plans are due by May 15.
- b) EMS Awards – the award review committee met last week to review the nominations, and selected seven people to receive awards. The ceremony will be held on Monday, May 18, 2015,

at 2:30 in the Hall of Flags. Weather permitting, there will also be a brief wreath laying ceremony at the EMS Memorial and Education site.

7. New Business

- a) Investigations Committee
 - i. Committee minutes and recommendations

MOTION: For the Investigations Committee to approve the minutes of the March 4, 2015, meeting as distributed. (Senecal; second by Contreras). Unanimous.

Heather McKenney reviewed the cases and responded to questions from Board members.

MOTION: To ratify the Investigation Committee minutes of the March 4, 2015, meeting, as presented (Conley; second by Contreras). Unanimous.

- b) Committee reports
 - i. Education – Don Sheets reported on the discussion regarding education for the first phase of the 2015 protocol revisions. The Education Committee had a split vote (6-3) on a motion that all training be done online via MEMSEd. The minority report supported the importance of consistent messaging, but pointed out the advantages of allowing in-person training sessions that use MEMSEd as the basis for instruction. This was also discussed at the March 31, Operations Team meeting with support for the minority report.

Don said that there will still be six regional training sessions that he will attend. MDPB members will also be invited/encouraged to participate as well. These meetings will include a train-the-trainer session for folks who have been approved by the region to conduct protocol updates.

Dr. Sholl reminded the Board about problems that occurred in the past as the training message became diluted and polluted by instructors who were not intimately familiar with the MDPB discussions and decisions.

MOTION: To approve the Ops and MEMS staff recommendation that phase one protocol training may be accomplished: online using MEMSEd, by attending a regional education session, or by an update provided by an approved instructor. Those interested in becoming instructors are encouraged to take the MEMSEd program prior to the regional presentations. (Contreras; second by Conley). Unanimous.
 - ii. Data - Jon Powers reported that work is continuing on the implementation of NEMSIS version 3.
 - iii. Exam - Drexell White reported that the committee is working on reducing the amount of time spent on EMR and EMT practical exams by providing more information in advance, with a question and answer session on the day of the exam.
 - iv. EMD – Drexell White reported that:
 - the committee is developing an EMD refresher that will be available this summer,
 - Wells Public Safety has applied to be a non-PSAP EMD Center,
 - there may be legislation introduced to enable PSAPs to implement fire and police

pre-arrival protocols. Funding for this would come from the 9-1-1 telephone surcharge.

Drexell also reported that the Fire/Police dispatch training program was well attended by dispatchers, dispatch administrators, and others interested in learning more. The general feeling was that support at this time seems to be more for the fire protocols.

- c) Trauma Plan – Rick Petrie summarized the work that was done to update the 1996 version of the Maine EMS Trauma Plan. The Trauma Committee had considerable discussion about whether American College of Surgeons (ACS) verified level 3 hospitals should also be eligible for identification as Trauma Centers, but in the end voted to keep Trauma Center designation for hospitals verified as ACS level 1 and 2 hospitals.

Board members made a few editorial suggestions, including a directory of acronyms.

MOTION: To approve the updated Maine EMS Trauma System Plan with edits as discussed. (Ontengco; second by Jackson). Unanimous.

8. Waiver request – Josh Belanger

Percy Thibeault recused himself from this matter, because of prior involvement with the subject.

Don Sheets summarized that Mr. Belanger is requesting a waiver to become licensed as an Instructor/Coordinator based upon completion of a Fire Instructor 1 & 2 course taken in April 2010. While the course itself is approved for this purpose, MEMS Rules require that training be within 3 years to be accepted for licensure. Mr. Belanger first contacted Maine EMS in 2014. At that time, he did not have the required 2 years of EMS experience and was told about his options, including requesting a waiver from the Board; however, he did not pursue the matter. Since 2010, Mr. Belanger obtained approximately 3-5 hours of instructional continuing education.

Regarding this request, the Board made the following findings:

- a) Mr. Belanger not did take reasonable steps to ascertain the rule and comply with it, which does not support the waiver request.
- b) Mr. Belanger was not given inaccurate information by an agent or employee of Maine EMS, which does not support the waiver request.
- c) There would be no harm to Mr. Belanger if the waiver is not granted, which does not support the waiver request.
- d) Granting the waiver may pose a health or safety risk to the public or community, which does not support the waiver request.
- e) Waiving the Rule would set a precedent that would unduly hinder the Board or MEMS, which does not support the waiver request.

MOTION: To deny the Instructor/Coordinator waiver request to Josh Belanger. (Malcolm; second by Ontengco) Unanimous.

9. Other –

- a) Jay Bradshaw noted that there are several Board members whose terms have expired: Percy Thibeault, Paul Knowlton, Nancy Jackson, Brian Stockdale, and Mike Senecal. Those whose terms lapse are still able to continue to participate as members until the Governor either reappoints or names a replacement. Because of staffing changes within the Governor's Office, those interested in reappointment are asked to submit the application material available online, and to notify MEMS so that the office can track the process.

- b) Staff is currently working on a draft of revised EMS Rules with a goal of presenting it for review at the June 3, 2015, meeting. Once approved by the Board, this first draft will be distributed for informal comments. Those comments will be considered by the Board prior to commencing the formal rulemaking process.
- c) Tim Beals asked the Board for thoughts on whether EMD and EMS licensees who come before the Investigations Committee should be handled differently. For example, the Board of EMS approved a matrix and process where staff could enter into a consent agreement with a licensee who practiced while unlicensed provided several criteria were met, one of which was the number of calls on which the provider participated while unlicensed. Laura Downing expressed concern that because of the number of calls that come into a busy center, a dispatcher would quickly hit that cap, and a cost-per-call fine levied by the Board could be significantly higher than for an EMS provider, even one at a busy service.

Consensus was that unlicensed practice is a serious offense, regardless of the setting in which it takes place. Efforts should continue to emphasize this point during courses, inspections, and site visits.

It was agreed that the Investigations Committee will review the current EMS matrix and work to incorporate provisions for EMD.

- 10. Next meeting will be Wednesday, June 3, 2015 @ 9:30
- 11. Meeting adjourned at 11:23.