

PAUL R. LEPAGE GOVERNOR STATE OF MAINE DEPARTMENT OF PUBLIC SAFETY MAINE EMERGENCY MEDICAL SERVICES 152 STATE HOUSE STATION AUGUSTA, MAINE 04333-0152



COMMISSIONER

JAY BRADSHAW DIRECTOR

BOARD OF EMS MEETING DE CHAMPLAIN CONFERENCE ROOM AUGUST 5, 2015

MINUTES – RATIFIED OCTOBER 7, 2015

Members Present: Mike Senecal (chair-elect), Matthew Sholl, MD (ex-officio), Tim Beals, Joe Conley, Greg Coyne, Laura Downing, Judy Gerrish, Nancy Jackson, Kalem Malcolm, John Martell, MD, Julie Ontengco, Percy Thibeault, Roger Audette

Staff: Jay Bradshaw, Alan Leo, Jason Oko, Jon Powers, Don Sheets, Drexell White, Katie Boynton

Office of Attorney General: Lauren LaRochelle, AAG

Regional Coordinators: Rick Petrie, Ben Zetterman

Guests: Marc Minkler, John Kooistra, Christopher Pare

- 1. Introductions made Jay introduced new staff who gave brief backgrounds about themselves.
- 2. Minutes
 - a) <u>MOTION: To approve the minutes of the June 6, 2015 meeting as amended. (Beals;</u> <u>second by Coyne). Unanimous</u>
- 3. Public Comments none
- 4. Maine EMS Update
 - a) Legislation None of the bills related to Maine EMS were affected by the veto process that is being discussed. LD 818 will go into effect 90 days after the official adjournment of the Legislature.
 - b) Community Paramedicine Jay covered the list of CP project sites and approval and start dates. With legislation there has been some concern about when the 3 year clock began.

- c) Operations Team No meeting
- 5. Medical Director Report
 - a) MDPB –Dr. Sholl reported that we are effectively completed with any protocol changes for Phase II. Work on the training materials will be underway in the next week and should be posted to MEMSEd in early September.

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i. MOTION: To have the start date be set as the date of first patient contact, Beals; Conley. Unanimous

- b) Interfacility Transport IFT White paper has received attention and comments from stakeholders.
 - i. Concern from services about the recommendation to have two licensed providers on every transport (IFT Only). A number of Board members expressed similar concerns. Dr. Sholl reminded the group about the importance of individuals being trained to package, move patients etc. Many of the patient examples given in the near future would likely not meet the medical necessity requirements to be transported by ambulance.
 - ii. The paper will go back to the Maine Hospital Quality Forum in September.
- c) QI Committee We have just sent out our most recent study and do not have any new information to share. We are discussing our next project which will likely surround the back boarding of patients.
- d) IRB
- i. Narcan Project The goal of this study is to look at whether the impact of Narcan legislation can be measured. Baseline utilization of Narcan by county to determine if there has been an increase in utilization. All information will be de-identified.
 - MOTION: to approve as presented Thibeault, Ontengco, Unanimous
- ii. Termination of Resuscitation project will look at a comparison of field termination with those that get sent to the hospital to see if there has been any to those transported. All information will be de-identified
 - MOTION: to approve as presented Downing, Jackson, Unanimous
- 6. New Business
 - a) Investigations Committee
 - i. Committee minutes and recommendations

<u>MOTION: For the Investigations Committee to approve the minutes of the</u> July 2015, meeting as distributed. (Beals, Senecal). Unanimous

Alan Leo gave a summary of cases and answered questions from the Board

<u>MOTION: To ratify the Investigation Committee minutes of the July 2015,</u> <u>meeting, as amended (Beals; second by Jackson). Unanimous</u>

- b) Committee reports
 - i. Education Don Sheets reported on the process and status of the Phase II protocols. The same model of education will be offered for Phase II as in Phase I with the addition of a requirement that all providers complete the quiz online. Additionally Don and Jon Powers recently attended a course to learn the deeper working of Storyline2 the software we build course content with. This should lead to improved user experiences in trainings on MEMSEd and will first be demonstrated with the Phase II education.
 - ii. Data Jon Powers reported that work is continuing on the implementation of NEMSIS version 3 and the Elite system.
 - iii. Exam Drexell White reported that the Mobile testing model that the group was working on was determined to not be feasible. The group is now working with some of the more isolated community colleges to facilitate exams. The colleges recently received a grant to implement testing centers and Maine EMS will work to support this model.

- Examiner Training is being developed for practical skills evaluation to improve the testing process.
- Joint meeting was held with the Education Committee to look at the psychomotor test for EMR and EMT level exams. The results of this meeting are to look at a sampling of stations to test as opposed to all elements. Long term the group would like to look at determining competency within the training center.
- iv. EMD Drexell White reported:
 - that he and Dr. Sholl have worked to implement an augmented EID tool to only ask if there has been recent travel and recent contact. If both are negative the questioning is defaulted back to the standard questions.
 - Refresher training has been developed for experienced dispatchers as a tool to be rolled out to EMD centers to work with. This has been piloted and comments are being reviewed, the product will be updated then offered to agencies for their use.
- c) Draft Rules The Board began review of comments from the informal comment period. It was determined that this was going to take more time than was allotted for this meeting and that the group would discuss the rules in more detail at the October meeting. Action items for October will be for Maine EMS staff to develop a definition of the Training Officer for review. Don Sheets will be arranging for a representative of the National Registry of EMTs to participate in a conversation about the National Continued Competency Program.
- 7. Waiver request Mark Stevens

Alan Leo summarized the waiver request of Mr. Stevens and his plan to acquire necessary education to adequately refresh his knowledge base for licensure as an EMT.

Regarding this request, the Board made the following findings:

- a) Mr. Stevens did not take reasonable steps to ascertain the rule and comply with it. This does not support the waiver request
- b) Mr. Stevens 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. Stevens if the waiver is not granted, which does not support the waiver request.
- d) Granting the waiver would not pose a health or safety risk to the public or community, which does 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.

<u>MOTION:</u> To deny the EMT license waiver request to Mark Stevens. (Conley; second by Gerrish) 10 for, 1 against ,1 abstention.

<u>MOTION: To enter executive session pursuant to 1 § 405 and 406 for the purposes of</u> <u>reviewing a personnel matter. (Senecal; Thibeault)</u>

- 8. Next meeting will be Wednesday, October 7, 2015 @ 9:30
- 9. Regular Meeting adjourned at 12:29.