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STATE OF MAINE  
DEPARTMENT OF PUBLIC SAFETY  
MAINE EMERGENCY MEDICAL SERVICES  
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JOHN E. MORRIS  
COMMISSIONER

JAY BRADSHAW  
DIRECTOR

BOARD OF EMS MEETING  
DECEMBER 3, 2014  
DECHAMPLAIN CONFERENCE ROOM

MINUTES

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

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

Office of Attorney General: Lauren LaRochelle, AAG

Regional Coordinators: Joanne LeBrun, Rick Petrie

Guests: Dan Batsie, Michael Gross, Rebecca Kendrick

1. Introductions made.
2. Minutes – October 1, 2014
  - a. **MOTION: To approve the minutes of the October 1, 2014, meeting as presented (Malcolm; second by Ontengco). Unanimous**
3. Public Comments – none.
4. Maine EMS Update
  - a. Budget – nothing new to report
  - b. Legislation – Maine EMS has submitted requests for Department bills and is awaiting final approval from the Governor's Office. The bills requested include: expanding the opportunity for Community Paramedicine Pilot Projects; correcting the reference to the Trauma Advisory Committee, which is currently listed under the Dept of Health and Human Services; transferring human patient simulator training equipment to LifeFlight of Maine; and making several technical changes to the EMS law. If approved by the Governor's Office, language will be drafted for presentation during the upcoming legislative session.
  - c. Community Paramedicine – The contract with the University of Southern Maine, Muskie School of Public Service has been finalized. USM will now be conducting interviews with CP pilot sites, and linking/evaluating data. Some of these data may contain confidential information, which requires approval before access can be granted. MEMS has a similar agreement with another USM project that is evaluating MEMSRR data quality, but because this is a different project, it also requires approval by the Board of EMS, the MDPB, and execution

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of a confidentiality agreement.

**MOTION: To approve providing the University of Maine, Muskie School, with access to Maine EMS Run Report records that may contain confidential information for the purpose of evaluating the MEMS Community Paramedicine Pilot Projects. (Contreras; second by Ontengco). Unanimous**

- d. Operations Team – The Ops team met on December 2<sup>nd</sup>. Ben Zetterman was introduced as the new regional coordinator for Aroostook EMS. Ben is an AEMT from Van Buren who recently assumed this new role. Other topics discussed were a review and update of the efforts regarding Ebola; the annual EMS week insert, and general updates. Nancy McGinnis will be again working on the EMS week insert starting in January.
  - e. Other –
5. Medical Director Report
- a. MDPB – Dr. Sholl updated the Board on the status of the 2015 protocol revisions. The webinars on each protocol section have been sparsely attended, but will continue for this update cycle.

Training is continuing for the greater Bangor area Zofran ODT pilot project. Once the training is completed, it will become operational.

QI – the timing of the Out of Hospital Cardiac Arrest study was unfortunately overshadowed by the Ebola activity. The OHCA project showed that the average survival rate for v-fib/v-tach in 2014 was 23%. In 2004, the survival rate ranged from 3 – 31%, but without standardized definitions for data collection, it is not possible to analyze these two studies. However, with standards in place, it will be possible to evaluate 2014 with future results.

Areas for focused improvement include CPR performance by responding crews and sharing best practices.

The QI Committee will be discussing the target for future projects.

- 6. Old Business – FY15 work plan. Jay Bradshaw reported that due to the extensive demands regarding Ebola over the past two months, there is nothing new to report.
- 7. New Business
  - a. Investigations Committee
    - i. Committee minutes and recommendations

**MOTION: For the Investigations Committee to approve the minutes of the November 5, 2014, meeting as distributed. (Contreras; second by Metayer) Unanimous**

Kalem Malcom recused himself from case #14-035.

Alan Leo reviewed the cases and responded to questions from Board members. Alan also presented a recommendation for handling QA reviews (e.g. case #14-079).

**MOTION: To ratify the Investigation Committee minutes of the November 5, 2014, meeting, including the recommendation for conducting QA reviews, such as case #14-079). (Rowe; second by Contreras) Unanimous with one abstention (Malcolm) regarding case # 14-035.**

- b. Committee reports
- i. Education – Don Sheets reported that work is continuing on expanding continuing education opportunities for Instructor/Coordinators, including a presentation on ethics in early 2015.
  - ii. Data - Jon Powers reported on the work regarding custom elements for NEMSIS V3, which is being sent to the MDPB for input. Jon also reported that initial informational sessions regarding RescueBridge have been very positive. RescueBridge will enable fire departments to comply with both fire and EMS reporting requirements with a single software package. RescueBridge also has a lot of other modules for scheduling, equipment, and records management. The Fire Marshal's Office is interested in funding the initial purchase, and will be working with MEMS on the infrastructure requirements to assure success. There are many steps to go before a final decision can be made, but if approved, the target date is late 2015.
  - iii. Exam - Drexell White reported on a joint meeting that was held with the Education Committee and the interest to use PSE skill sheets for QI review. These skill sheets are not currently made available.

**MOTION: To approve the use of PSE skill sheets for QI review and revise the Exam Administration Manual accordingly. (Senecal; second by Malcolm). Unanimous.**

Mobile Testing Site – the Pearson Vue contract currently has language that is inconsistent with state contracting requirements. A similar situation arose in NH, and Drexell is working to get a copy of the revised contract for consideration by the Bureau of Purchases.

- iv. EMD – Drexell White reported on the Emerging Infectious Disease (EID) tool that was distributed and activated. Letters regarding use of the EID tool were also sent to PSAPs, EMD centers, and EMS services.  
  
A letter was also sent to EMS services regarding the use of determinate codes; and clarifying how these codes could be used for either service policies or to develop response plans. The letter provided examples to help guide the services in appropriate usage.

- c. Rules Hearing – Drexell reported on the comments received during the hearings and public comment period. There was considerable discussion on the request that the Board insert language regarding regional QA/I activities; however, because these were not part of the formal rules process, such a change would be considered substantive and require going through the entire revision process again. There was also concern expressed that including regional QA/I in the Rules may present a conflict with the regional contracts for services.

**MOTION: The Board approves the response to comments as presented and declines to insert a section on Regional QA Committees. The Board expects that regions will retain their role in QA, but prefers that it will be defined through contract. (Senecal; second by Conley) Unanimous with one abstention (Malcolm)**

**MOTION: To approve the Basis Statement as presented ( Senecal; second by Conley). Unanimous**

**MOTION: To approve the QA/I Rules as presented with an effective date of February 1, 2015 (Ontengco; second by Downing). Unanimous**

- d. Emerging Infectious Diseases
- i. Regional Ebola Assessment, Care, and Transport (REACT) Plan - Jay Bradshaw and Dr. Sholl both provided an overview of the extensive activities regarding Ebola and EID; and the regional response plan. For almost two months, MEMS has had daily (sometimes many times a day) conference calls and meetings with DHHS; and daily conference calls with the regional offices.

A goal of the REACT plan is to coordinate current practices, including medical control and hospital destination, with Maine CDC Infectious Disease and Epidemiology. This includes having guidelines for local services, which are being compiled by Joanne LeBrun and Kara Walker (Central Maine Resource Center), identified regional referral hospitals (anticipated to be Maine Medical Center, Central Maine Medical Center, Maine General Medical Center, and Eastern Maine Medical Center), and regional ambulance services working closely with these hospitals (e.g North East Mobile Health Care, United Ambulance, Delta Ambulance, and Capital Ambulance respectively).

Maine CDC is working on a letter of understanding with the hospitals, and Maine EMS is working on a similar letter for the EMS services.

- ii. Waiver Requests – there were two waiver requests presented to the Board regarding equipment requirements when transporting patients suspected Ebola patients. The first is from a single ambulance service, the second is from Maine EMS on behalf of designated regional transporting services.

American Ambulance requested a waiver of the equipment requirements to enable them to carry minimal equipment on their vehicles when transporting an Ebola patient.

In discussing this request, there was concern about how this would apply for ambulances that were responding to an emergency call and integrate with the REACT plan.

The Board reviewed the criteria for American Ambulance waiver requests as follows:

1. American Ambulance did take reasonable steps to ascertain the rule and comply with it, which has no impact on the waiver request.
2. American Ambulance was not given inaccurate information by an agent or employee of Maine EMS, which has no impact on the waiver request.
3. There would be no harm to American Ambulance if the waiver is not granted, which has no impact on the waiver request.
4. Granting the waiver may pose a health or safety risk to the public or community, which does not support the waiver request.
5. Waiving the Rule would not set a precedent that would unduly hinder the Board or MEMS, which has no impact on the waiver request.

**MOTION: To deny the equipment waiver request to American Ambulance. (Rowe; second by Contreras) Unanimous.**

The Board then reviewed the criteria requirements for the request from Maine EMS on behalf of ambulance services that are identified as regional transporting

services and responding in accordance to the REACT plan to transport a suspected Ebola patient:

1. Maine EMS did take reasonable steps to ascertain the rule and comply with it, which has no impact on the waiver request.
2. Maine EMS was not given inaccurate information by an agent or employee of Maine EMS, which has no impact on the waiver request.
3. There may be harm to Maine EMS if the waiver is not granted because of the hardship it may provide in responding and transporting a suspected Ebola patient, which supports the waiver request.
4. Granting the waiver would not pose a health or safety risk to the public or community, which supports the waiver request.
5. Waiving the Rule would not set a precedent that would unduly hinder the Board or MEMS, which has no impact on the waiver request.

**MOTION: To support the waiver request submitted by Maine EMS on behalf of regional transporting ambulance services when responding in accordance with the REACT plan. (Senecal; second by Ontengco) Unanimous**

It was noted that if American Ambulance becomes an identified regional transporting ambulance service that they would be eligible for the equipment waiver.

- e. Nominating Committee – Kalem Malcolm reported that the Nominating Committee recommends Mike Senecal for the position of Chair-Elect, to which Mike has agreed. There were no other nominations from the floor.

**MOTION: To elect Mike Senecal as Chair-elect for the Board of EMS. (Malcolm; second by Ontengco) Unanimous.**

- f. Other
  - i. Joe Conley noted that he realized a potential conflict of interest regarding case # 14-032 and requested reconsideration of the motion whereby the Board ratified the minutes.

**MOTION: To reconsider the action taken by the Board with regard to ratification of the Investigation Committee minutes of November 5, 2014. (Contreras; second by Ontengco) Unanimous.**

**MOTION: To ratify the Investigation Committee minutes of the November 5, 2014, meeting, including the recommendation for conducting QA reviews, such as case #14-079). (Rowe; second by Contreras) Unanimous with two abstentions (Malcolm regarding case # 14-035 and Conley regarding case # 14-032). (Ontengco; second by Downing) Unanimous.**

8. Other updates – Judy Gerrish thanked the Board and MEMS staff for their support during her tenure as chair, and complimented all for their commitment to the MEMS system.

Effective at the conclusion of this meeting, Judy will become Immediate Past Chair and Jeff Rowe will become Chair, and Mike Senecal will become Chair-elect.

The annual committee reports and work plans will be reviewed and discussed at the February 4, 2015, meeting. These reports will also include recommendations for both committee membership and chair positions, which run concurrent with the term of office for the Board of EMS Chair.

9. Meeting adjourned at 12:00; next meeting will be Wednesday, Feb 4, 2015 @ 9:30.