

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



JAY BRADSHAW DIRECTOR

Medical Direction and Practice Board March 21, 2012 9:30 am – 12:30 pm Agenda

| Medical Dire | <u>ctors Present</u> – Cormier, Busko, Sholl, Pieh, Goth, Randolph <u>ctors Absent</u> – Klein, Chagrasulis, <u>Present</u> – Bradshaw, Powers | |
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| | ke Choate, Shawn Evans, Eric Wellman, Jessica Robichaud, Joanne Lebrun, Nate Yerxa, Bu ny Brockway, Brian Chamberlin, Kerry Pomelow, Rick Petrie | tch Russell, Don |
| Feb 2011 Minutes | Presented - approved as amended | Motion to Accept: Pieh Seconded: Cormier Approved By: All |
| ME EMS Update | Bradshaw - It appears that the budget cuts for FY12 (now through June 30, 2012) may be toward the lower end of the previously mentioned range. The details are still being worked out. - Of greater concern is how the FY 13 budget (starts July 1, 2013) will be affected by the ongoing budget cuts. - RFP for trauma system coordinator upcoming | |
| New Device: | None Submitted | |
| Special Circumstanc Protocol | None Submitted | |
| Agitated Patient Pilot Project | Update - Training with Camden last week and expected to go live in the next few weeks, Ro Capitol training upcoming. Pen Bay seems to be seeing fewer Bath Salts patients – EMMC numbers drop for a while, but are now increasing again. | |
| TEMS Discussion | Discussed MEMS history in discussing TEMS including former work group and the Specialty Program Project. Update from Jonnathan Busko that he has been working on TEMS protocol for Bangor through the Specialty Program Projects process that was approved by the MDPB in 2007 and that this process has proven to be very difficult. Nate Yerxa and John Kooistra (both practicing on TEMS teams) both felt as if MEMS protocols were mostly sufficient for TEMS emergency situations but less so for non-emergent situations (Team Care/Preventive Care). | |
| | General discussion re: process from this point on. Decision – will re-convene the TEMS workgroup to discuss the following 2 questions: What is the best "place" for TEMS protocols to exist in Maine – under Specialty Programmers Companion Manual? When discussing this – will need to address the difficulty of the Specialty Programmers | - |

| | working on the cover letter for the PIFT survey. Meeting April 13th to finalize the Medical Director Manual. | | |
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| Subcommitte | MHA meeting was canceled, due to snow storm. Anticipate meeting with them at their next meeting in June. Jay & Matt | | |
| IFT Subsemmitte | Update – | | |
| MEMS QI | Update - meeting after MDPB to continue work on initial data report re: administration of aspirin to chest pain patients. | | |
| Operations | No actionable items | | |
| MEMS | Subcommittees working on Clinical Behavioral Objectives (CBOs) to reflect the national education standards. Maine EMS newspaper supplement upcoming on May 18 th | | |
| MEMS Education | Eric Wellman – CBO's/CEH categories were discussed at the last meeting – with the understanding that the education committee is only PROPOSING changes at this time. | | |
| | Old Business | | |
| transport | | | |
| capacity refusing | | | |
| decision making | well for review Expecting to hear within the next 1-2 weeks | | |
| Patients with | the AG that works with MEMS is supportive but is sending to other AG's that work with DHHS as | | |
| Discussion: | Questions about requriements should be directed to MEMS staff. Update from Jay Bradshaw – Has presented to the AG's office who is reviewing it. On first revie | | |
| | This discussion also shed light on uncertainty regarding the rules regarding drug boxes. MEMS staff drafted a letter to services reviewing the rules and regulations regarding drug boxes. | | |
| | hospital pharamcies would contact Ms. Simone directly. | | |
| | NNEPC Director is the point of contact. In the event of a need to access these stockpiles, | | |
| | Update re: MESMEd Update re: discussions with NNEPC and the state and national stockpiles. Karen Simone, | | |
| | regional offices. Regional offices are then asked to put their own contact information on the letter before forwarding to hospitals within their region. | | |
| | Letter to the Pharmacists has been drafted. Jay will put on state letterhead and send to | | |
| | 5) Region 2 – No new shortages to report 6) Region 6 – Zofran supplies restored and no other new medications shortages to report | | |
| | Region 4 – No new shortages to report. Shortages of typical PIFT meds will likely result in increased calls to PIFT medical directors | | |
| | but pharmacies protecting EMS stock | | |
| | Region 5 – No changes Region 1 – No changes from last month – still some shortages effecting the hospitals | | |
| Shortages | Region 3 – no new news – remain low on same meds but no initiation of alternate protocols | | |
| Drug | Update from the Regions – | | |
| | into effect 90 days after the vote with expectations toward July/August - RFP for Community Paramedicine released recently | | |
| Community Paramedicin | Community Paramedicine pilot project – committee process went well with a unanimous ought pass with minor amendments – still not out of committee but should be soon and if passes, will g | | |
| | director neded, QI requirements, need for continuing education, etc) | | |
| | what the protocols are, and the support structure behind the protocols (initial education, medical | | |

Next Meetings - April 18, 2012

IFT Sub Committee - 8:30 MDPB - 9:30 - 12:30 QI - 1:00 - 3:00