



STATE OF MAINE
DEPARTMENT OF PUBLIC SAFETY
MAINE EMERGENCY MEDICAL SERVICES
152 STATE HOUSE STATION
AUGUSTA, MAINE
04333



JOHN ELIAS BALDACCI
GOVERNOR

ANNE H. JORDAN
COMMISSIONER

BOARD OF EMS MEETING
JULY 7, 2010
DECHAMPLAIN CONFERENCE ROOM

JAY BRADSHAW
DIRECTOR

MINUTES (APPROVED)

Members Present: Tim Beals (chair), Matt Sholl (ex-officio), Joe Conley, Peter DiPietrantonio, Richard Doughty, Judy Gerrish, Paul Knowlton, Steve Leach, Jeff Rowe, Geneva Sides, Wayne Werts, Bob Hand Lori Metayer, Roy Woods (via videoconference).

Staff: Drexell White, Dawn Kinney, Alan Leo, Jon Powers, Kerry Pomelow

Regional Coordinators: Joanne LeBrun, Rick Petrie, Donnie Carroll, Steve Corbin (via videoconference)

Office of Attorney General: Laura Yustak Smith, AAG

Guests: Daniel Moore, Donnie Armstrong

1. Introductions made and guests welcomed.
2. Minutes

AAG Laura Yustak Smith offered changes to the minutes that better reflect and clarify the Board's actions of the May 5, 2010:

MOTION: To approve the minutes of the May 5, 2010 meeting, with the following changes that more clearly reflect and clarify the board's actions:

- **Remove "numerous" from "provided numerous examples where other consent agreements..." on page 2;**
- **Strike "...additional information..." in the motion concerning Brian Dunnigan to "...confirmation regarding an actual change of circumstances underlying the consent agreement..." on page 2 (DiPietrantonio and Leach approved the amended and second to their May 5, 2010 motion);**
- **Strike "...had no contact.." in the paragraph relating to Ken Albert and insert "...gave him no other information..." on page 3;**
- **Strike "..., but provided no additional information" in the paragraph relating to Jeff Rowe and insert "No other information was provided beyond which was provided to the Board and the prior contact with Mr. Dunnigan did not affect his decision regarding today's action." on page 3;**
- **Strike "..., but did not provide any additional information" in the paragraph relating to Wayne Werts and insert "No other information was provided beyond which was provided to the Board and the prior contact with Mr. Dunnigan did not affect his decision regarding today's action." on page 3;**
- **Strike "..., but did not provide any additional information" in the paragraph relating to Joe Conley and insert "No other information was provided beyond which was provided to the Board and the prior contact with Mr. Dunnigan did not affect his decision regarding today's action." on page 3 (Werts; second by Leach) Unanimous**

3. Public Comments - None

4. Old Business – None

5. New Business

a. Investigations Committee

MOTION: That the Investigations Committee approve the minutes of the June 2, 2010 meeting, as presented (Doughty; second by Leach) Unanimous

Dawn then reviewed the cases included in the minutes.

MOTION: That the Board ratify the Investigation Committee meeting minutes of June 2, 2010 (Leach; second by DiPietrantonio) Unanimous

Staff requested Board guidance concerning an Emergency Medical Dispatch (EMD) Center's personnel, who failed to apply for EMD license renewals after completing requisite refresher training and prior to the expiration of their licenses.

At its January 2010 meeting, the Board directed that (until January 31, 2011) due in part to the confusion created between certification and licensing of emergency medical dispatchers, and the relatively new process of EMD personnel licensing, that any person who completed EMD refresher training prior to license expiration and who did not apply for renewal would receive a letter of guidance to resolve unlicensed practice issues. Because of the length of time and number of EMD calls involved in the situation at hand, staff is seeking Board guidance whether to handle the matter consistent with the Board's January 2010 action or to take some other action in reference to the unlicensed EMD personnel.

Following discussion, the consensus of the Board was to handle the situation of unlicensed practice (as presented by staff) consistent with the Board's January 2010 direction.

b. Regional Progress Reports

Chairman Beals reported that the Reporting Committee has developed a template that follows the various aspects of the regional contract in order to make it easier to report and to follow the work of the regions. He indicated that the goal is to have the reports available on the website.

Several regional coordinators indicated that the template will make it easier to report, however concerns were expressed about report details and that the first time that the regional coordinators saw the template was when it was mailed as part of the Board's July 2010 meeting packet.

Steve Leach questioned whose responsibility it will be to report Training Center activities occurring in a given region and regional needs, when the training center is not from within the region. For example, who is responsible for training done by NCTI or southern Maine EMS in the Mid-Coast region? He cited contract language that spoke to regions' responsibilities "...coordinate and assist in EMS training programs..."

It was suggested that Steve Leach's concerns need to be reviewed as part of the training center process.

Wayne Werts suggested that the Modeling Committee should meet with the regional coordinators to get their input regarding the template.

The next report is due September 2010. The consensus of the Board was to take no formal action, but ask the regions to (voluntarily) use the reporting template for the September report in order to identify necessary changes the template.

Roy Woods suggested that training centers be required to report training within a given region to regional offices. However other members felt that such a requirement would place an undue burden on the regions and that each entity should report to Maine EMS. The Chair suggested that the issue should be noted and discussed at a later time.

c. Southern Maine EMS EMT-I Written Exam

Staff reported that it had received a license application from an EMT-Intermediate license applicant, who had taken their written exam at southern Maine EMS on 6/16/10. The application had a grade, but the grade was not initialed by Exam Administrator, Donnie Carroll. Maine EMS contacted southern Maine EMS on 6/18/10 and verified the passing grade.

On 6/22 /10, Maine EMS received another application from an applicant who had also sat for the 6/16/10, EMT-I written exam. Attached to the exam was a summary score sheet. The total number of incorrect questions listed on the sheet indicated the person had passed the exam. However, upon recalculation by Maine EMS staff, the summary score sheet indicated that the person had failed the exam.

Southern Maine EMS was contacted and asked to forward all score sheets to Maine EMS. Further investigation by Maine EMS staff revealed that the applicant who submitted for licensure on 6/18/10 had actually failed the EMT-I written exam and the 6/22/10, applicant - whose summary score sheet recalculation indicated a fail – actually passed the exam. The 6/18/10 applicant was contacted and notified that the license had been invalidated and that the applicant would need to re-test.

Maine EMS requested all exam score sheets from southern Maine EMS, performed its own scoring and administered a re-test in southern Maine on 6/29/10 for the three applicants requiring re-testing. One applicant passed, the other two failed.

Following the presentation, the Board found that staff had addressed the issue and that no Board action was required.

d. Portland Fire Department Pilot Project

Chief Fred Lamontagne and Deputy Chief Terry Walsh of the Portland Fire Department have met with Maine EMS staff to discuss the implementation of prioritized response (in Portland) on a limited basis, and based upon the following emergency medical dispatch determinant codes.

- Public Assist (i.e., a fall without injuries or priority symptom)
- Carbon Monoxide Detector alarm (without priority symptoms)
- Obvious Death
- Poisoning (without priority symptoms)
- Sick Person (without priority symptoms).

Dr. Sholl spoke to the proposal, and about the community-based efforts to support Portland's indigent population through early detection of at-risk persons and referral to appropriate non-EMS resources.

Staff is bringing the City of Portland's proposal to the Board for guidance about continued development of a pilot project to implement (limited) prioritized response in Portland. A pilot project would allow implementation of a tiered response on a trial basis that would otherwise be in conflict with the rules; Portland Fire Department Medical Crisis Unit (MEDCU) is currently license to the Paramedic level, requiring the service to provide a Paramedic on all emergency calls.

Development will include establishing emergency medical dispatch (EMD) and emergency medical services (EMS) quality assurance benchmarks to ensure that appropriate care and/or referrals are medically appropriate.

The Board expressed support for the concept.

Motion: That the Board supports continued development of a pilot project to allow the City of Portland Fire Department to implement limited prioritized dispatch based upon emergency medical dispatch determinant code; and, that once developed the proposal be brought back to the Board for approval, after review by the Medical Direction and Practices Board (MDPB)(Leach: second by Woods – Unanimous)

e. Waiver Request – Wells Fire Department 12 Lead EKG

Board members reviewed a waiver request presented by staff on behalf of the Wells Fire Department to waive Chapter 17 §5.1.A.1, which requires that all services permitted to the EMT-Intermediate level to have a cardiac monitor/defibrillator with 12-lead capabilities. Due to an error in the Maine EMS licensing program, Wells Fire Department was not included as one of the services in the January 6, 2010 waiver granted to services licensed or permitted to the EMT-Intermediate level. The January 2010 waiver delayed implementation of the cardiac monitor requirement to July 31, 2011 to allow services time to include cardiac monitor defibrillator in their budgets.

The Board reviewed the specifics of the waiver and found that:

- Wells Fire Department took reasonable steps to ascertain the rule and comply with it. (reference Maine EMS Rules Chapter 13 §2.1).
- Inaccurate information was not given by an agent or employee of the State EMS program. (reference Chapter 13 §2.2).
- Wells Fire Department would experience a significant financial hardship if it had to purchase the monitor/defibrillator with 12-lead capabilities prior to the next municipal budget cycle (reference Chapter 13 §2.3).
- Based upon run data for Wells Fire Department and input from Drs. Sholl and Diaz, a health or safety risk to the public would not exist if the waiver were granted (reference Chapter 13 §2.4).
- Waivers are considered on a case-by-case basis and waiver of the Rule would not set a precedent or unduly hinder the Board or office in its administration of Maine's EMS system. (reference Chapter 13 §2.5).

The majority of the factors for issuing the waiver - found in Maine EMS Rules Chapter 13 - are in favor of issuing the waiver.

Motion: To approve the waiver of Chapter 17 §5.1.A.1 of the Maine EMS Rules (dated October 1, 2009 & January 1, 2010) in order to allow Wells Fire Department until July 31, 2011 to purchase a cardiac monitor/defibrillator with 12-lead capabilities (Werts; second by Rowe – Carries 12-0-1 [Conley abstains])

f. Legislative and Budget Updates

Staff indicated that there was nothing new to report.

g. Committee Updates

i. Operations Team

Joanne Lebrun reported on behalf of the Operations Team that the Team:

- Last met on June 8, 2010
- Discussed the shortage of available testing slots for EMT candidates at Pearson View Testing Centers completing the spring semester classes. End of semester testing slot availability is limited because other disciplines such as nursing uses the Pearson Vue Centers to provide certification/licensing testing. Sites in New Hampshire were discussed as a possible way to alleviate the shortage. The Ops Team will continue to monitor and inquire about test slot availability
- Reviewed the standardized EMT-Intermediate licensing fees for EMT-I set by Maine EMS for tests it administers. Maine EMS has recommended use of the fee structure to the training centers.
- Reviewed the Data committee letter about changes to the Maine EMS run reporting system
- Heard from Jay Bradshaw that electronic run reporting grants have been awarded to approximately twenty-five entities in Maine
- Raised a question about liability and service medical direction, and the possible indemnification through the state of Maine for service –level medical directors. Jay Bradshaw will follow-up on the question.
- Provided regional updates to the group

ii. Data

Jon Powers reported that:

- The last meeting of the Data Committee was June 17, 2010
- On July 1st changes were made to the Maine Run Reporting system and included code updates. There were some issues regarding historical data and some minor labeling changes that were identified during the change.
- Importing services continue to be a big issue. Several large services (e.g., Delta, Northeast, Capital and LifeFlight) will be deploying new systems that should improve (overall) reporting
- Next projects for the Data Committee:
 - Rollout of new run reporting form. The goal is to roll-out the new form to a handful of services prior to overall implementation. The form should improve reporting and data quality
 - Pilot project with Maine General to begin importing pre-hospital run form data directly into the hospital system.

iii. Education

Kerry Pomelow reported that the Educations Committee:

- Met on June 9, 2010

- Discussed protocol changes, their impact on EMS Education and the need to ensure that the Committee stays current with protocol changes made by the Medical Direction and Practices Board.
- Worked on changes to Continuing Education Hour (CEH) categories and hours for presentation to the Board. The changes will be designed to better align Maine with National CEH categories.

iv. EMD

Drexell White reported that:

- The EMD Committee met in June 2010
- The Committee discussed the latest revision of the EMD protocols version 12.1 that includes a stroke diagnostic tool, and an improved inter-facility protocol
- The Emergency Services Communications Bureau (ESCB) and the Public Utilities Commission PUC have issued a Notice of Inquiry (NOI) to gather information about the next round of Public Safety Answering Point (PSAP) consolidations from twenty-six to fifteen to seventeen. Responses to the NOI may be found by going to the ESCB website and following directions to the NOI response page.

v. Exam

Drexell White reported that the Exam Committee:

- Met in June 2010
- Reviewed EMT-Intermediate practical skill sheets and will be revising them
- Will be preparing a joint statement with the Education Committee outlining the importance of having serviceable equipment for testing (e.g., oxygen in oxygen tanks, functional suction units, etc).
- Discussed an issued forwarded by the Education Committee concerning oxygen tanks with integrated regulators and its effect on practical testing. The tank units have been adopted by many of the hospital systems and are showing up in the pre-hospital environment. Research by staff revealed that the tank/regulator units were introduced by the compressed gas industry and was not a result of Federal or state law or rules. Tanks with the pin index safety system remain in use. Consensus of the Exam Committee was that testing oxygen regulator and tank set-up would remain part of practical testing.

Jeff Rowe asked that the February 2010 Exam Committee minutes be corrected as Committee member Jeff Regis was listed as both present and absent.

h. Other – None

6. Staff Reports

a. Maine EMS

Drexell reported that Jay Bradshaw had communicated with the regional offices that the regional contracts had been submitted to State Purchases for processing.

Jay has also distributed a clarification about the role of EMS providers as related to athletic trainers.

Aroostook EMS has received approval as a Basic Life Support EMS Training Center, which brings the total number of authorized Training Centers to nine.

b. Medical Director Report

i. MDPB/QI/HART

Dr Sholl reported:

- Protocol revisions will be completed and go “live” in 2011. The protocol review began last winter with an overall review and continues with review of specific sections. Final review and changes will be completed this fall.
- Lesson learned from the last protocol rollout was to not roll-out protocols concurrent with the start of the new fiscal year. The 2011 roll-out will occur so as to not conflict with July 1, 2011.
- There is a national move through the National EMS Information System (NEMSIS) to coordinate and foster similarities of protocols. The current list of NEMSIS codes are being reviewed to update (e.g., abdominal pain is not currently included as a NEMSIS code). The goal is to have Maine be more in-line with national standards
- A system improvement envisioned by Drs. Sholl and Diaz is to establish quality markers within Maine’s EMS protocols. Quality would be specifically defined within the protocols and Maine EMS Run Reporting System (MEMSRR) reports would be used to track quality compliance.
- The Quality Improvement (QI) committee met in the spring and decided to continue with 12 lead electrocardiograms (EKG) and airway QI. He commented on the importance of being able to drill down to specific facts of case involving airway management and/or 12 lead EKG.
- At the QI last meeting several services and hospitals were tasked with reporting back to the QI committee about how their systems run, where they excel and where they need improvement. The goal is to develop a resource guide/ “toolkit” to help services and hospitals with their QI processes and systems improvements.
- At the last Heartbeat, AMI Response & Treatment (HART) meeting, the group heard from regions, services and hospitals that are doing 12 lead EKG QI. The Hart Work Group and will be compiling the information to present it to services and hospitals to assist in their 12 lead QI efforts.

Adjourned at 11:15 – next meeting will be September 1, 2010.