



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
NOVEMBER 3, 2010
DECHAMPLAIN CONFERENCE ROOM

JAY BRADSHAW
DIRECTOR

MINUTES (FINAL)

Members Present: Tim Beals (chair), Matt Sholl (ex-officio), Ken Albert, Joe Conley, Richard Doughty, Paul Knowlton, Lori Metayer, Percy Thibeault, Wayne Werts, Roy Woods

Staff: Jay Bradshaw, Dawn Kinney, Alan Leo, Jon Powers, Drexell White

Regional Coordinators: Joanne LeBrun, Donnie Carroll, Steve Corbin

Office of Attorney General: Laura Yustak Smith, AAG

Guests: Stephan Bunker, Terry Walsh, Peter Daigle, Tim Nangle, John Koistra, David Brass, William Naugle, Michael Carroll, Dave Robie, Chris Pare'

1. Introductions made and guests welcomed.
2. Minutes

MOTION: To approve the minutes of the September 1, 2010, meeting as distributed. (Doughty; second by Knowlton). Unanimous

3. Public Comments – Stephan Bunker, ESCB, reported that the PSAP Reconfiguration Report has been completed and is available at their web site. www.maine911.com. Work continues on the Quality Assurance Study, which is expected to be available before January 1, 2011.
4. Old Business – Portland Fire/MEDCU. Following up on their presentation at the July Board meeting, the City's proposal to pilot test response codes for certain calls was discussed at the MDPB. The MDPB approved the plan for 5 types of calls based upon the Priority Dispatch System:
 - 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)

The City will achieve and maintain an overall Center Compliance of 95% (NAED standard). The Board acknowledged that due to the low call volume, the performance may vary slightly. The Board will be looking for trends more than individual report figures.

The City will also review all calls and report back to the Board in 6 months.

MOTION: To approve a pilot project for the City of Portland to alter their response for: calls without symptoms, falls without symptoms, CO alarms, poisoning without symptoms, and obvious unquestionable death, provided that the City reviews the number of calls recommended by NAED and meets the overall Center Compliance rates. The City will report back to the Board in 6 months. (Werts; second by Doughty). Unanimous.

5. New Business
 - a. Investigations Committee

MOTION: For the Investigations Committee to approve the minutes of the September 1, 2010, meeting with a typographical correction in case # 10/38, inserting that it was the provider's license that expired. (Doughty; second by Knowlton) Unanimous

MOTION: For the Investigations Committee to approve the minutes of the October 6, 2010, meeting amended to read that on page 8, "the victim of the theft was a fire department." (Doughty; second by Metayer) Unanimous

MOTION: For the Board of EMS to ratify the minutes of the September 1, 2010, meeting of the Investigations Committee (Thibeault; second by Knowlton) Unanimous

MOTION: For the Board of EMS to ratify the minutes of the October 6, 2010, meeting of the Investigations Committee. (Doughty; second by Thibeault).

Laura Yustak Smith explained that at the meeting there was discussion about issuing a "non disciplinary consent agreement" in case # 10/50; however, in researching the statute, she was unable to find reference to such an action.

MOTION: To amend the minutes of the October 6, 2010, Investigation Committee and change the non-disciplinary consent agreement to a letter of guidance. (Werts; second by Doughty) Unanimous.

The MOTION as AMMENDED carried with 8 in favor and 1 opposed (Woods).

Ken Albert suggested that the Board establish an ad hoc committee to look at issues of unlicensed practice and make recommendations to help reduce the number of incidents. Committee will consist of Ken Albert, Lori Metayer, and Roy Woods.

- b. Waiver Request – William Naugle

Mr Naugle was an EMT whose license had expired by more than 3 years when he applied for renewal based upon an EMS refresher that he took in southern Maine. His application was denied by MEMS staff and Mr. Naugle appealed that decision to the Board and requested a waiver that would enable him to renew his license.

In considering this case, the Board found that the applicant took reasonable steps to ascertain the rule; was unable to make a determination on whether he was given inaccurate information by an agent or employee of Maine EMS; determined that he would be significantly harmed if the waiver was not granted by virtue of being unable to get a job with a fire department; determined that granting the waiver could pose a health or safety risk because the applicant admitted that his EMS skills were "rusty"; and did not feel they were setting a precedent since each case is considered individually and on its own merits.

After discussion, the following motion was made:

MOTION: To deny a waiver of Chapter 5 §4.3(a) to William Naugle because his license had expired by more than two years. (Conley; second by Albert) Carried with 6 in favor and 3 opposed (Woods, Werts, Thibeault).

- c. AMR license consolidation. Joe Conley disclosed that he worked for AMR for 18 years, but that would not affect his ability to make an objective decision in this matter. Dr. Sholl indicated that he reviewed and has approved AMR's QI plan.

MOTION: To approve AMR's application for a single license. (Metayer; second by Albert) Unanimous.

- d. Other – Tim noted it is time for the Board's Personnel Sub Committee to conduct a performance evaluation of the EMS Director. The sub-committee consists of the chair, chair-elect, immediate past chair (others were also invited to participate). Tim will convene the sub-committee and then the Board will discuss this in Executive Session at a future meeting, following which the Board chair will meet with the EMS Director.

Due to time constraints with the Investigation Committee meeting scheduled to begin informal conferences at 1:00 PM, the Board requested written committee reports. The annual committee goals and work plans will be discussed at the January 5, 2011, meeting.

6. Staff Reports

a. MEMS Report (Jay Bradshaw)

- i. Training Center update –Kerry has been busy working with others and conducting onsite reviews at Training Centers. Distributed to the Board was a letter Kerry wrote in response to the Kennebec Valley site visit. Discussion followed regarding whether this required action by the Board, and the consensus was that this responsibility was assigned to MEMS staff. The Board requested updates, but only needs to be involved if there are problems or concerns encountered.
- ii. NASEMSO – Jay, Kerry, and Dr. Sholl all attended the National Assn of State EMS Officials annual conference and meeting. There were specific sessions for medical directors, training and education coordinators, data managers, trauma, pediatric emergency care, and state directors. Sub committees included rural health, communications, and emergency preparedness. Several sessions were on the culture of safety in EMS. NHTSA recently awarded a contract to the American College of Emergency Physicians to develop material to help educate EMS providers about the importance of safety matters.
- iii. A draft of proposed ambulance standards has been developed by the National Fire Protection Agency, with input from a wide variety of interested parties. NFPA 1917 is intended as a first step in ambulance standards utilizing the federal (KKK) purchasing guidelines that have been in place for many years. NFPA 1917 is not intended as an comprehensive safety guide, it was reported that step would commence in 2012, with perhaps an effective dated of 2017. NFPA 1917 is open for comments until December 15, 2010. MEMS will be monitoring the NFPA process and also assembling an in-state group to discuss measures that can be taken to improve safety in Maine.
- iv. Maine has received a grant from the Maine Office of Rural Health to develop and pilot test a Community Paramedicine project. This will be a 3 year project to first collect information about similar projects around the country, conduct informational sessions, and then to draft the criteria for identifying and assessing pilot project sites.

- b. Medical Director Report (Matt Sholl, MD)
 - i. The HART committee has not met since the previous Board meeting, but is planning to meet in November to review the data collected by the cardiac centers.
 - ii. MDPB – work continues on the next revision to the MEMS treatment protocols, and a draft for public review and comment is available at the MEMS web site. Considerable effort has gone into this revision to be mindful of contemporary research, to the extent that it is available, and to the national education standards and scope of practice project. The draft version includes a table at the beginning of each section highlighting the changes and some background about the proposal. QI indicators will also be incorporated for airway and chest pain protocols. Comments will be accepted until January 7, 2011. The MDPB will then review the public comments along with input from the Education Committee and Operations Team. No effective date has been discussed, but it is likely to be the latter part of 2011.
 - c. The Board was reminded about the Mid Coast EMS Conference Town Meeting – November 12, 2010 @ 6:00, at the Samoset Resort.
7. The next meeting is scheduled for Wednesday, January 5, 2011 @ 9:00 AM.

Meeting adjourned at 12:35