BOARD OF EMS MEETING
OCTOBER 1, 2014
DECHAMPLAIN CONFERENCE ROOM

MINUTES

Members Present: Judy Gerrish (chair), Jeff Rowe (chair-elect), Matt Sholl MD (ex-officio), Roger Audette, Tim Beals, Greg Coyne, Laura Downing, Nancy Jackson, Paul Knowlton, Kalem Malcolm, Mike Senecal, Percy Thibeault

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

Office of Attorney General: Lauren LaRochelle, AAG

Regional Coordinators: Joanne LeBrun, Rick Petrie

Guests: John Kooistra

1. Introductions made.

2. Minutes – August 6, 2014
   a. **MOTION:** To approve the minutes of the August 6, 2014, meeting as presented. *(Beals; second by Coyne). Unanimous*


4. Maine EMS Update
   a. Budget – nothing new to report
   
   b. Legislation – Maine EMS has submitted requests for Department bills regarding Community Paramedicine and other routine and technical changes to the EMS statute. A decision on this request will be made by the Administration after the election.

   c. Community Paramedicine – There were six proposals received to conduct the evaluation of the Community Paramedicine pilot projects. The University of Southern Maine received the top score and if there are no appeals filed, contract discussions will begin. The RFP process added 4-5 months to this project, and as a result, preliminary data may not be available until late in the next legislative session.
d. Other – 
- Maine EMS participated in several meetings with Maine elder care groups. The discussions included an overview of the Community Paramedicine pilot projects and opportunities to collaborate on developing awareness training for EMS providers.
- Jay, Don, and Dr. Sholl will be attending the National Association of State EMS Officials annual meeting in Cleveland the week of October 5.

e. Operations Team – The Ops team met on September 30 and among the topics discussed were inviting Maine CDC to provide an overview of the current goals for the Regional Resource Centers, planning for flu season, and discussion about future infectious disease preparedness. Ops also discussed patients who repeatedly call EMS for non-emergency issues; and Jon made a presentation on the new MEMSRR Hospital Hub and NEMSIS 3 activities. Steve Corbin (Aroostook EMS) reported that he sold his home and is moving to Pennsylvania. He will continue to work from PA over the next month while the Council works to hire a new regional coordinator.

5. Medical Director Report

a. MDPB – Dr. Sholl updated the Board on the status of the 2015 protocol revisions. For this revision, each MDPB member is conducting an online webinar prior to their section being discussed at the MDPB. These webinars, which are recorded and available online at MEMSEd, have been helpful in having an expanded discussion about changes of interest to EMS providers.

The next section to be discussed is Trauma (green), which will include spine care. The pediatric protocols from the PEGASUS project were activated in Houston this past week. Lessons learned from Houston will be included in the rollout planned in Maine for the 2nd quarter of 2015.

The first phase of having New England regional protocols is to have each state adopt similar formatting. ME, NH, VT, and MA have now accomplished that step. Phase two will be assessing where the state protocols are similar and where they are different. Phase three (~5-6 years from now) will be having the same protocols.

The QI Committee continues its work on the Out of Hospital Cardiac Arrest QI project, which includes developing presentations for EMS providers. These presentations will include a letter and video which are in the final editing stages.

Other topics of interest include awareness and preparedness for ebola and other emerging communicable diseases. The US CDC has guidelines for hospitals and EMS providers, which has been pushed out through numerous sources. Providers are encouraged to check the US CDC site for updates.

Nothing new on PIFT to report. Work continues, albeit slowly, as resources are needed in other areas.

6. Old Business – FY15 work plan. Jay Bradshaw reported that he and Lauren LaRochelle have had a few casual conversations about if/how Board members could participate in collecting information from providers about the EMS system in a manner that assures compliance with open meeting requirements. Progress in this area has been affected by other demands, but is continuing.
7. New Business

a. Investigations Committee

i. Committee minutes and recommendations

*MOTION: For the Investigations Committee to approve the minutes of the September 3, 2014, meeting as distributed. (Beals; second by Senecal)*

*Unanimous*

Laura Downing recused herself from case #14-027 because of her past involvement working with the individual involved.

Kalem Malcolm disclosed that he also worked with the individual in case #14-027 about 10 years ago; that he has not had contact with the individual or received outside information regarding this case, and that he feels his previous experience will not affect his ability to be objective regarding this case.

Alan Leo reviewed the cases and responded to questions from Board members.

*MOTION: To ratify the Investigation Committee minutes of the September 3, 2014, meeting as amended. (Thibeault; second by Rowe) Unanimous with one abstentions (Downing) regarding case # 14-02.*

ii. Tim Beals reviewed the draft policy regarding participating in Investigations Committee activity via video/audio conferencing technology. Discussion took place regarding the challenges and opportunities this provides. Among them are that while the subject may make such a request, the Investigations Committee will decide whether to accept the request or reschedule until the participant can attend in person.

*MOTION: To accept the Investigation Committee’s draft policy regarding use of remote technology to participate in meetings and hearing. (Senecal; second by Malcolm). Unanimous*

b. Committee reports

i. Education – Don Sheets reported that the Education Committee is working on expanding continuing education opportunities for Instructor/Coordinators. The committee is also monitoring the protocol updates and discussing training needs. Following the NASEMSO meeting, Don will be participating in an item writing session at the National Registry of EMTs in Columbus, OH.

ii. Data - Jon Powers provided an overview of the Maine EMS Run Reporting System (MEMSRR), which started as a voluntary option in 2006 and became mandatory in 2009. The MEMSRR currently has ~ 1.8 million records.

Maine was one of the first 10 states to submit data to the National EMS Information System (NEMSIS) and has monitored the development of the NEMSIS 3 data standard. NEMSIS 3 makes several changes regarding the required data elements and the business rules that will be used to validate records.

The Data Committee recently held an extensive discussion on how to make MEMSRR changes that are NEMSIS compliant, recognizes the needs of researchers, and is field provider friendly. The results of that discussion are detailed in the supplemental report distributed with the Board packet.
Jon also described the timeline for converting to NEMSIS 3 with a goal of implementation on April 1, 2015.

**MOTION: To approve the Data Committee’s recommendation for changes to MEMSRR and implementation of NEMSIS 3. (Senecal; second by Beals). Unanimous**

During the development of NEMSIS 3, the Board passed a moratorium on reviewing new vendors interested in exporting data to the MEMSRR. With the change to NEMSIS 3, there are changes in how a vendor is verified to be NEMSIS compliant. To incorporate these changes into the MEMSRR, it is recommended that third party software vendors:

- Must be NEMSIS “Collect Data” Compliant
- Must demonstrate the ability to collect and submit all Maine EMS required elements and values
- Must successfully, without intervention, pass XML generated by the client
- Must submit to MEMSRR via web service

All current third party vendors doing business in Maine affected have been contacted, and all but one exporting service participated in the Data Committee review process. Of these vendors, Zoll and eMeds are in testing for NEMSIS 3, Sansio is “in the process”, and the status of EMS Charts is unknown following a protracted law suit.

**MOTION: To approve the recommended requirements for third party software approval. (Rowe; second by Thibeault). Unanimous.**

iii. Data Request – the Centre for Outcomes Research and Evaluation at Yale University is requesting access to data from the MEMSRR for research purposes. This project will link EMS data with Medicare data to research how EMS care provided prior to hospitalization is associated with patient outcomes for cardiovascular conditions and identify areas of improvement. Jon and Dr. Sholl have both been involved in the development of this request, which has been approved by Yale’s Human Investigations Committee (IRB).

Jay explained that the steps required for access to confidential run report data includes: Board approval, MDPB approval, MEMS Director approval, and execution of the MEMS Confidentiality Agreement.

Following discussion about data security and accountability, the following motion was made:

**MOTION: To approve the Centre for Outcomes Research and Evaluation’s request to obtain data from Maine EMS that may contain confidential information. (Malcolm; second by Jackson). Unanimous.**

iv. Exam - Drexell White reported that the Committee met on September 30, to continue its work on evaluating practical skills examinations. The Exam Committee will be inviting members of the Education Committee to join them at the November meeting to discuss releasing the skill sheets to students following an examination.
v. Maine EMS has received preliminary approval from Pearson-Vue to be an authorized test site, which is the first step in becoming approved as a mobile testing site. Drexell will be visiting a mobile testing site in NH later this month to learn more about how this operates.

vi. EMD – Drexell White reported that the EMD Committee is working on developing an EMD refresher, which is a frequent request as he conducts the annual PSAP and dispatch center site visits. Also being developed is an orientation to the MEMS online licensing system. Services will soon be receiving a letter clarifying when a Response Plan is necessary, which will also include updating the response assignment guide. MEMSRR is being modified to capture the determinant code to assist in evaluating the effectiveness of service response plans.

c. Rules Hearing – The public hearing on the proposed QA/I rules will be on Wednesday, October 8. There will be sites in each region for public participation in the hearing via video/audio conference calling. The rules process requires the presence of at least two Board members (combined among all sites), and Drexell White reviewed the Board members who committed to do so.

Following the hearing, the public will be able to make written comment for 10 days. After these the close of public comment, MEMS will compile the comments received for review, response, and action at the December Board meeting.

d. Other – Judy Gerrish requested members to serve on a nominating committee. Mike Senecal (chair), Tim Beals, Paul Knowlton, and Kalem Malcolm volunteered to solicit interest in the Chair-elect position and report back at the December meeting.

Jay Bradshaw also noted that at the meeting where a new Board chair is appointed, standing committees also provide their annual reports and goals. Committee chairs serve a term concurrent with the Board chair, and recommendations for those positions will also be presented beginning in December.

8. Other updates – Jay Bradshaw reminded members about the annual EMS Town Meeting which will be held on Friday, November 14 at 5:00 at the Samoset EMS Conference. This is an open and informal opportunity to discuss activities and answer questions.

Rick Petrie provided an overview of the conference plans which include the Trauma Advisory Committee on Wednesday (11/12), Maine Cardiovascular Health on Thursday (11/13), EMS management on Friday (11/14), and many other interesting programs throughout the weekend.

9. Meeting adjourned at 11:15 AM.