

EMS Advisory Committee Minutes  
November 13, 2013

Attendees: Chris Bell, Mike Leyden, Jess Freire, Randy Terk, Kate Soons, Jenna Protzko, Pat Malone, Mike Paradis, John Vose, Debbie Bach, Mark Podgwaite

Meeting called to order by Chris Bell at 1306.

Minutes from the September 23rd meeting were reviewed. There were no suggestions or corrections.

Draft Report to the Legislature

Thanks to Kate Soons and data from Jenna Protzko, the report draft is ready. Jenna explained that the first chart is based on time the unit is notified to the time they are on scene (not time enroute to on scene). The data represents ambulance services almost exclusively, since it is drawn from SIREN. Several states that were surveyed said they had a minimum requirement for “time notified to enroute.”

The group reviewed the report together.

- Issue #2: Some members remembered that VLCT had been against the idea. Kate explained that the group had been more evenly split at the September meeting. She added that the Legislature is welcome to the survey results, should they be interested in them. Pat suggested adding the results of the survey as a chart to the report.
- Issue #3: Fresh data will be pulled on December 1, before sending the report forward. Jenna noted that several services, including Regional Ambulance Service, use a third-party vendor and may not be fully reporting into SIREN yet. It was noted that using a “dispatch to enroute” time may very well include a provider responding in a POV to the station.

Chris will make a couple of corrections and then send it forward around VDH, AHS and onward. He hopes to submit the report by the second week of December. He said he had considered asking the Legislature to take off 2 of 3 of the items that are no longer needed, but that request will not make it onto the VDH rulemaking list for this year. VDH was also going to suggest some changes in the membership roster, to include adding a pediatrician to the group.

Pat asked and Chris clarified the way VDH sets legislative priorities for the coming year.

Work plan for Committee: EMS Plans for Towns

No one could remember who was going to look into town plans or fire plans for towns and gather some information. Chris thought it might have been Bill Hathaway who was looking into the VEM template.

Mike Paradis asked about District representatives and the thought on rotating to another chair after their year has been served. Kate said her understanding was that the responsibility was supposed to fall onto another person in the rotation, but that if the districts wanted to maintain continuity by having the same person remain, it was up to those districts represented. Chris agreed that that was the philosophy. Mike Paradis told Mark Podgwaite to call him.

Pat asked if there was NASEMSO information available regarding town plans. Chris said that nothing has been collected already in this regard, but state directors could be surveyed and asked if there is a requirement for municipalities to have EMS plans, and if so, are there templates, samples, etc.

It was also suggested that if services have contracts with the towns they serve, that language might be informative as well. Mike Paradis said he has contracts with some towns, but not others. There is nothing in-depth enough in the contracts to be called a plan.

The term “EMS Plan” has yet to be defined by the group.

Chris explained that towns need Emergency Management Plans to qualify for grant funding. However, Steve from VLCT said that fire and police agencies are not required to have plans, and most EM Plans are just “fill in the blank.”

Kate asked if the Committee could invite folks to come and speak to the issue to see if there is a need for EMS Plans. She also asked what the group was trying to accomplish: preparedness for another Hurricane Irene or preparedness for the next ambulance call. She suggested perhaps inviting someone from EM to talk about the EM Plan.

There are no known “plans” required in statute per VLCT.

Chris said that NASEMSO could be approached for information and that the group was welcome to invite guests like Emergency Management reps to attend a meeting.

Mike Paradis and John Vose explained that each town has to decide where a 9-1-1 call is routed to, and that this requirement is in statute. Kate suggested pulling that data for the next meeting. Chris read the law to the group, and everyone agreed it was rather vague.

#### Next Meeting

Only 6 out of the 15 representatives of the committee were present at the meeting. The requirement is to hold 4 meetings the first year, and two the following years. Chris asked the group their preference, and the decision was quarterly.

The next meeting is at 108 Cherry Street in Burlington on Thursday, February 19 from 1-3 p.m.

## EMS Updates

### Protocols

Typos and corrections are still being requested on the 10/6 protocol release. Staff has been busy getting pricing for printed versions. If an agency's members have all completed the protocol education, they may go live with the new protocols as soon as January 1. All agencies must complete protocol education and go live by March 31. Keep Jess Friere posted as you progress.

Chris added that the office will release additional guidance on the statement, "Call for Paramedic intercept. If Paramedic intercept is not available, call for AEMT intercept." He said feedback had been almost universally good. Once changes are made, they will be pushed out in accordance with the guidelines laid out on the inside front cover. Information is pushed to District Chairs and DMAs. Also to heads of service, who are expected to push information outward to their personnel.

Pat remarked that teaching has been a bit of a nightmare. Lots of moving parts between textbooks, protocols and field implementation. The students find it confusing. Chris suggested simply teaching the students, and allowing the agencies to speak to protocols and field implementation. Jess explained that protocol education will be taught in classes moving forward, so it'll be a built-in component. The students need not worry that protocol education will confuse them with NR testing. For example, a lot of the new protocol education has to do with specific equipment. Also, intranasal narcan at the EMT level will not be tested at the NR level.

When asked, staff explained that intranasal narcan can be drawn up from a vial or that prefilled syringes can be used. Depends on the agency and supplies on hand. There is a non-needle adapter for intranasal use.

Any continuing education sessions at the conference that dealt with protocol education should be recorded in a member's training records. Attendance is based on the honor system. Jess stressed that a protocol education session at the conference did not cover the practical component of that education. Chris added that it's up to the agency as far as how much or how little of that type of education they will accept.

The District Medical advisors (11 out of 13) met for 5 hours during the recent EMS conference. The group will meet twice a year going forward. The meeting went well. There was some

discussion about restrictions—call in vs. standing orders—but staff did not hear a wholesale rejection of parts of the protocols.

#### CentreLearn

Jess reported that she is still working to set up training officers with their service's personnel. She will host web-ex trainings beginning in December with a focus on Centrelearn. So far 2,831 providers have accounts on Centrelearn, and 1,346 of them have logged in thus far. Over 3,500 hours of education have already been completed.

#### Regional/District-based CE (Special Fund)

Four out of 13 of the district W-9s have been received. The funds represent \$9,000/year in educational opportunities. All districts have been supplied with the information.

#### Conference

Conference went well and there were some excellent speakers and sessions. Evaluations are being compiled and hope to have information out in the next month or two. Chris announced the tentative dates of the conference as October 14-19. A contract is not yet in place with the venue, which will be in the southern part of the state.

#### SIREN

Jenna announced that while NEMESIS Version 2 data is being collected now, both Vermont and ImageTrend will go live with NEMESIS V3, a revised data dictionary and the Elite platform on October 1, 2014. Chris added that ICD 10 coding will go live nationally on October 1, 2014 so all CMS billing will convert then as well.

Over 86% of the ambulance services are reporting now. Hope for 100% by December 1, 2013.

The state has QA/QI plan development in the works.

#### EMS-C

Waiting for final PEPP class date/location to be finalized. The other three dates and locations are firm and will be announced. Once courses are rolled out, each district will receive their instructor kits and books. Hoping to do this on a multi-year cycle.

Interviews are taking place this week and next for the two Child Passenger Safety openings and it is hoped that individuals will be hired in early December. Pat asked about the types of training being sought. Chris said that if the individuals were not already technicians or instructors, they will be sent for training. Both of the individuals will work with the car seat program and one of them will be the injury prevention coordinator for VDH.

### Recruitment and Retention

Work and initial meetings on best practices have started.

Mike will be hosting two workgroups:

Interfacility Transfers          December 5 from 1-3 p.m.

Firefighter Rehabilitation      December 11 from 1-3 p.m.

Both meetings will be web-based as well as live, and held in Room 2B at 108 Cherry. All interested individuals are welcome to attend or call in.

Mike outlined a two-page letter which will be going out to providers in the next couple of weeks. There is nothing new in the letter—just covering some basics about National Registry certification, Vermont licensure, transition vs. protocol education and expectations going forward.

### Other Business

Mike Paradis said that Jim Finger had not been getting emails about Advisory meetings. Chris explained the invite went only to advisory committee members. John Vose will keep Jim Finger updated.