

## EMS Advisory Committee Minutes

January 14, 2015

Attending: Chris Bell, Mike Leyden, Ray Walker, Dan Manz, Seth Lasker, Randy Terk, Mark Considine, Drew Hazelton, Ben O'Brien, Mike Paradis, Scott Brinkman, Jim Finger, Bill Hathaway, Deb Bach, Steve Jeffries, Erin Ingebretsen, Pat Malone

### Minutes of September 17, 2014

- Approved without changes.

### Work Plan for Committee

- The third and final step is the report to the legislature. Steve Jeffries circulated a draft in September and no feedback was received. One change that was made to the last page was to change "enroute" to "out of state." That report has been submitted.
- One more report back to the legislature (a third one) will be required.

### Rulemaking

- A number of rules are being changed, particularly if they pertain to:
  - New state laws
  - Military member, or spouse of military member, returning from deployment.
  - Minimum standards for credentialing
  - Federal law conflicts (e.g., FAA rule vs. EMS rule)
  - Disciplinary vs. ADA (American Disabilities Act) wording
  - Clean up old "certification" language / consistency of language throughout.
  - Discipline
  - Data reporting
- Hope to have draft sent out for informal comment by the end of January. Once the formal process starts, time is limited and there cannot be give and take. The time to address concerns is during the informal process. All are urged to submit comments/suggestions.

Changes to discipline language - consolidating language existing regarding conduct, and also pertaining to notification when a person is charged or arrested for a crime. The department takes action based on the facts of a case, not court action.

- KKK specs for ambulances – The GSA (KKK) spec is being retired in approximately 1 year. NFPA will issue a revision of their specs in 2016, and 2 other standard-setting organizations are in the process of creating new standards. These standards affect only new ambulances. VT EMS uses

the term “incorporated by reference” in rule to acknowledge whichever specifications/standards are currently in force.

### **Protocols**

- All NE states took part in Pegasus, a research project that has bearing on statewide protocols such as airway, shock, pain, allergic reaction, asthma/croup/RAD and spinal immobilization.
- A proposed change would limit epinephrine to auto-injector vs. drawing up a dose. Still up in the air, but it’s a question of patient safety vs. financial costs.
  - Several members spoke against this change for financial reasons.
- Spinal motion restriction changes would mean that patients are not routinely backboarded.

### **IFT Scope/CCP Programs**

- No protocol changes will be made specific to CCP.
- Still working with partners to offer a curriculum at reduced or no cost.
- Existing CCP are still functioning through 2016. Once released, agencies can train personnel, get DMA signoff and move forward.
- DMAs have expressed approval of heparin drips and reversal agents for Paramedics. That change will be incorporated in protocol updates.
  - Chris noted that while financial interests and patients’ best interests are weighed, this particular decision was an easy one.
  - Limited to patient transfers.
- Jim Finger asked if those with UMBC credentials could be fast-tracked before a decision on curriculum was made. Chris said plans were still under development, and no promises could be made at this time.
- Recertification requirements will be determined by the credentialing agency (e.g., UMBC, etc.). DMA signoff will be required for the individual and agency.

### **EMS Training**

- Jess Freire, State Training Coordinator, has retired. Position will be posted soon.
- Holding 2 evaluator training sessions, after which training will roll out to the districts and services. Exams themselves will not change, but some scenarios may. The office is working with the Registry to clarify language to patients, evaluators and models. The following methods will be employed:
  - Online LMS – Centrelearn Solutions

- CE for Instructor/Coordinators and trainers – taught around the state and pushed out.
  - State proctors will undertake this project for the time being.
  - Staff noted that they are aware of commitment and consistency issues, and are working to find incentives and build more consistency.
- Instructor/Coordinator bridge course will be held in Newport at the end of January. This is the 4<sup>th</sup> in recent years. Plans for an initial I/C course are still in the works.

### **SIREN**

- Master data dictionary will be finalized by mid-March for services using 3<sup>rd</sup> party vendors. Sticking with the national element list as much as possible.
- New platform will also include statistical analysis (QA/QI) tools, and training will also be included. The platform will look and feel more like FieldBridge.
- Staff indicated they are looking into licensing questions, like hookups to physiologic devices.
- There was a question about Elite rollout in 2016 and whether both can run concurrently, transfer of data, etc. (Mark Considine).

### **EMS-Based Mobile Integrated Healthcare: Falls Prevention Program**

- The Department has received a 2-year, \$525K grant centered on initial and subsequent falls' prevention in the elderly. 19 providers from 12 agencies will be at the first 2-day training in March. They will practice for one month, and then attend a 1-day training. An annual fee will be provided to agencies making x number of visits per year.
- 8-9 state or local health departments were awarded similar grants.
- Hoping to reduce morbidity and mortality. Based on behavior changes for individuals as well as changes to the home.
- Forerunner to community-based para-medicine. Mike Leyden noted that the office has been speaking to Vermont Health Access regarding the role of EMS.

### **Open Discussion**

- Question from Steve Jeffries about reimbursement rates and issues of making financial ends meet. Jim Finger said the VAA had been invited to a legislative coffee at the statehouse. A bill is being written and conversations are ongoing with DVHA.
- Report is in to the legislature from this committee. Unless the committee wants to tackle more, their work is done.
- Randy Terk noted that volunteer providers are a dwindling resource. The age of the volunteer is rising and the pool of volunteers is diminishing. As a group, can the committee propose compensation for volunteers? A property tax or income tax credit? Retirement?

- Ben O'Brien said this has been discussed in fire service, but that it's a local control issue. In addition, municipalities are already providing services and taxing.
- Randy suggested a defined contribution plan that towns could put monies into.
- Dan Manz asked if there are ways to incentivize volunteerism. He said this also begs the question of the role of this committee, as well as the commissioner, heads of service, legislature, etc. He suggested volunteerism as an agenda item.
- Ben said he believed this group could be successful in championing and reporting on behalf of EMS in the same way that other coalitions and groups have for fire service.
- Chris said that this group can advise the Department. And while state employees cannot lobby legislature, this group can, if they so choose.
- Pat Malone suggested adding the following to the next agenda:
  - Volunteerism assistance
  - Roles of committee
  - Look at training burdens to services (for example, FF1 course is free; EMS courses are not.)
    - Randy Terk noted that the IAFF places a surcharge on homeowners' insurance rates in order to cover training costs, etc.
- Special Fund:
  - Chris noted that all funds are accounted for and being distributed.
- Volunteer recruitment and retention campaign (OnCall Vermont) will be released before EMS Week. Aimed at drawing volunteers into EMS and MRCS. A tool kit will be going out to agencies shortly.
- Currently 2,814 EMS providers are licensed in Vermont. While the number is cyclic depending on the licensure cycle, it is the highest since Chris Bell joined VDH.
- National Registry is moving away from refresher and toward a number of continuing education hours. A portion of those will be determined by NR and a portion by state/local, then elective. Things are still in flux.
- National Registry exam fees have increased. Vermont will continue to cover all exam attempts.
- Credentialing – Chris said there will be language added to rule then up onto the website. He envisions cafeteria-style demonstrations of competence.

### **Next Meeting**

- April 8 from 1 - 3 p.m.

