General Session Meeting Minutes

February 3, 2011

COMMITTEE MEMBER ATTENDEES:

Jim Allen, Third Service Non-Transport Member

Vicki Armbruster, Volunteer Third Service Member

Joe Cladouhos, Idaho Hospital Association Member

Denise Gill, Idaho Association of Counties Member

Dennis Godfrey, County EMS Administrator Member

Robert Hansen, Fire Department Based Non-Transport Member

Lloyd Jensen, Idaho Chapter of the American Academy of Pediatricians Member

Mark Johnson, Private Agency Member

David Kim, Idaho Chapter of ACEP Member

Scott Long, Idaho Fire Chiefs Association Member

Catherine Mabbutt, Board of Nursing Member

Mike McGrane, Air Medical Member

Tom McLean, EMT-Paramedic Member

Bill Morgan, Committee on Trauma of the Idaho Chapter of ACS Member

Michelle Priestley, EMT Basic Member

Gary Showers, Advanced EMT-A Member

Murry Sturkie, DO, Idaho Medical Association Member

Pat Tucker, Consumer Member

Mark Zandhuisen, Career Third Service Member

COMMITTEE MEMBERS ABSENT:

Travis Myklebust, EMS Instructor Member

VACANT MEMBER SEATS

Vacant, Emergency Pediatric Medicine Physician Member

EMS STAFF ATTENDEES:

Rachael Alter Marc Essary

Mindi Anderson Valerie Fend-Boehm

Michele Carreras

Kay Chicoine

Barbara Freeman

Wayna Danny

Wayne Denny Dia Gainor
Margaret Eldrich Tara Knight
Season Woods

Other Attendees:

Chris Amenn, Meridian Fire David Reynolds, Moscow Fire Justin Dillingham, LifeFlight Network Lynette Sharp, Air Idaho Rescue Bill Arsenault, Wildland Fire Rescue Melanie Skiftun, Donnelly EMS

Tony Balukoff, LifeFlight Network

Danny Warn, IDHW – Health Preparedness

Mike Irwin, Bannock County Ambulance Service Mike Weimer, Air St Luke's

David Jackson, Nampa Fire

Discussion Decisions/Outcomes

TOPIC

Minutes approved.

New members Jim Allen, Joe Cladouhos, Bill Morgan.

Resignations or pending resignations: Kenny Bramwell, Lloyd Jensen.

Term Expirations: Dennis Godfrey, Mark Johnson, David Kim, Gary Showers

Next EMSAC Meetings:

June 29 & 30, 2011 Courtyard Marriot October 20, 2011 Courtyard Marriot February 16, 2012

Additions to Agenda SB 1021

Rules Update – Wayne Denny

Wayne Denny gave an update on the project to update the EMS Licensure and Investigation Rules. The EMS Bureau received several comments concerning the draft Agency licensure rules. Because of the questions and concerns about the statutory authority to enable endorsement organizations and the proposed initial agency license review process the agency rules will not be presented during this legislative session. In order to salvage the investigation and personnel licensure sections of the rules, the EMS Bureau decided to separate the rules and draft stand-alone investigation and personnel licensure temporary rules. The investigations and personnel licensure rules will be presented to the Board of Health & Welfare in May and, if approved will become effective on July 1, 2011. The agency licensing section will be re-worked and submitted as a proposed rule during the 2012 legislative session. The investigations and personnel licensure rules will also be submitted as proposed rules in 2012. Work will also continue on the education and exam rule sections for submission in 2012.

The Rule section topics are EMSAC, education, exams, personnel, agency, air medical, and investigations. The no longer used Board of Medicine seat on EMSAC will be changed to give a seat to the Office of Highway Safety at the Department of Transportation.

The 16.01 series of rule chapter numbers have become available and the EMS Bureau will begin moving the EMS rules into the 16.01 series to better organize EMS rules. Here are the proposed numbers:

- 16.01.01 EMSAC
- 16.01.02 Agency Licensing Requirements
- 16.01.03 Data Collection and Submission
- 16.01.04 Reserved
- 16.01.05 Education Standards
- 16.01.06 Examination Requirements
- 16.01.07 Personnel Licensing Requirements
- 16.01.08 Reserved
- 16.01.09 Air Medical
- 16.01.10 Landing Zone Safety
- 16.01.11 DNR
- 16.01.12 Complaints, Investigations & Sanctions

Draft rules will be posted on the website when ready. There will be an opportunity for public comment.

Volunteer Idaho Information Danny Warn

Danny Warn from the Volunteer Idaho Information Health Preparedness Program from the Department of Health and Welfare (DHW) demonstrated the internet based system. This is used in times of emergency to activate volunteers, correlate activities, and assess resources.

Volunteers register and are verified every 6 months against licensure data. The volunteers are involved in trainings and exercises.

In the past the system has been used for the H1N1 event to recruit volunteers to give immunizations and to report symptoms to CDC.

Queries can be made to hospitals to find out current capacity to take patients. Almost all hospitals have users and passwords and are asked to report status every 24 hours. An event is associated with google map technology. Homeland security has passwords. Working on policy to integrate with them. Some neighboring states (Wyoming, Nevada, Oregon) have the same system and collaborate with Idaho.

StateComm can activate the system in case of emergency. There will be a media event in the spring to debut the system.

www.VolunteerIdaho.org

Transition to National Education Standards

Season reviewed the history of EMS education changes.

National Background

- 1996 The "EMS Agenda for the Future" is published.
- 2000 The "EMS Education Agenda for the Future: A Systems Approach" is published, listing five elements of the education system. These five elements are:
 - 1. National EMS Core Content (the universe of EMS knowledge and skills)
 - 2. National EMS Scope of Practice (delineation of provider practice levels)
 - 3. National EMS Education Standards (replaces the National Standard Curricula)
 - 4. National EMS Certification
 - 5. National EMS Education Program Accreditation

National EMS Core Content published by National Highway Traffic Safety Administration (NHTS) and Health Resources and Services Administration (HRSA)

2006 "EMS at the Crossroads", Institute of Medicine Report

2007 National EMS Scope of Practice model published

2009 National Highway Traffic Safety Administration published the National Emergency Medical Services Education Standards

Idaho Background

2006 House Bill 858 is signed into law creating the Idaho EMSPC. EMSPC is responsible for setting the Scope of Practice in Idaho

NREMT Timeline

The National Registry of EMT has announced the following schedule for transitioning to new EMS designations for exams:

- First Responder exam "sets" on December 31, 2011
- Emergency Medical Responder (EMR) exam "rises" on January 1, 2012
- Emergency Medical Technician-Basic (EMT-) exam "sets" on December 31, 2011

- EMT exam "rises" on January 1, 2012
- Advanced EMT (AEMT) exam "rises" on June 1, 2011
- I-85 exam (current Idaho Advanced EMT) "sets on March 31, 2013
- EMT Paramedic (EMT-P) exam "sets" on December 31, 2012
- Paramedic exam "rises" on January 1, 2013

Students need to test by the "set" date or they will need to take a transition course to test. The advanced exam is available at NREMT by June 1, 2011, but the Bureau is not implementing the new AEMT until 1/1/2013. There will be an overlap of the I-85 exam that sets on March 31, 2013. There is no overlap for the other designations. Transition courses will be available six months ahead of these dates. Transition to the new AEMT level requires the completion of a written and practical exam.

Season reviewed the EMR transition timeline. By April 1, 2011 a new personnel licensing standards manual will be issued. Personnel will be held to the standards manual that was effective at the time their license was issued. Personnel can transition early, but the expiration dates will stay the same.

A personnel licensing standards manual for AEMT will be issued in 2012. The new temporary personnel rule will not include the requirement for a refresher course.

The transition course may look like a refresher, but it is not. Emergency Medical Services Physician Committee (EMSPC) will need to decide if we're transitioning with or without Idaho specific elements. EMSPC has determined floor and ceiling scope of practice in personnel licensure.

- Q. What would be the best timing for agencies, start now or wait for the transition? A. It will vary by agency. Need to watch the exam timeframes. If you're not planning on licensing right now, you can wait. If teaching an EMT class right now, you'll have three more years to cross that bridge. If you take the extra training, you will still need to wait for licensing.
- Q. What about new textbooks? A. You can use the textbooks based on the National Standards Education textbook. The same book can be used for transition.
- Q. Is the Bureau preparing a white paper so that agencies will know what is on the horizon? Need to get the word out. A. The Bureau is publishing a transition guide by 6/2011. The Bureau is considering having town hall meetings to discuss process, education, licensure, and scope changes. The last bridge course was for EMT-B in the mid 1990s. The evaluation component will be competency based and does not have minimum classroom time requirements. The educational gap analysis has a guideline of reasonable estimates of timeframes and budgetary issues. There are no exam fee changes.

SB 1021 (RS19924)

Murry Sturkie, representing the EMS Physician Commission, spoke about SB 1021. He invited members to become involved in the list serve discussions.

Senate Bill 1021 would "amend existing law to clarify an exception to the unlicensed practice of medicine as it pertains to the Outdoor Emergency Care credential and standard of training provided by the National Ski Patrol System, Inc., under certain circumstances."

Dr. Sturkie stated that this exemption for licensure promotes that ski patrol is providing first aid, but their training is equivalent of the

emergency care level of an EMT. They are trying to exempt themselves from licensing, background checks, regulation, and training standards by tying in with the "Good Samaritan" section of the Medical Practice Act and leveraging language that states: "where no fee is contemplated, billed, or received...."

Members expressed concern about whether this amendment would alter the "Good Samaritan" or provision of "first aid" section negatively. Our goal is not to change what already exists for Good Samaritan and first aid.

Is it regulation or oversight that we need? Does everyone practicing medicine in Idaho require oversight? Apparently the ski patrol is practicing medicine. This exemption would also exclude them when they're not on ski's, etc.

Motion that "EMSAC recommends that the EMS Bureau and EMSPC of DHW oppose exemptions from licensure or medical oversight for any personnel functioning with a scope of practice of an EMR or higher, and that the department work with its deputy attorney general to identify and correct any loopholes in Idaho Code to ensure proper regulation of these personnel and services" was seconded and carried.

Education Subcommittee Report

Tom McLean delivered the subcommittee report

Note: Craig Adamson passed away yesterday in an accident.

The Education subcommittee is dovetailing work with what is going on in the Education and Exams task force.

The subcommittee discussed topics about methodology for delivering timeline items, implementing course site visits to assure compliance and course quality and to set criteria and requirements for courses and instructor standards for the transition. Current standards may not be able to allow instructors to deliver needed transition training. Need method to deliver timeline items.

Licensure Subcommittee Report

Mark Johnson presented the subcommittee report.

Marc Essary reported the status of current agency licensure activities. There have been 20 active applications, eight transport and 11 non-transport, and one unknown. There are 12 pending applications, five incomplete applications and three are currently under review.

Discussed the upcoming process for agency license renewal:

- Packet to agencies two months prior to site visit
- -Includes renewal application, potential talking points, etc.
- -Contact with the agency administrator one month prior to site visit to finalize meeting date
- Invitation will also be sent to the medical director
- -Meet with the agency administrator(s), medical director, go over agency specific talking points, equipment inspection and verification, etc.
- Agencies with no deficiencies: licenses will be produced and mailed in the month following site
 visit
- Agencies with deficiencies will receive a Bureau review, a compliance plan, and a follow up visit if required.

Discussed and gave recommendations on how to evaluate and approve or deny requests for waiver to the 24/7 response requirement for non-transport services and exceptions to the minimum equipment list.

A question was raised about specific agencies being licensed or upgraded. Lynette Sharp voiced a desire to know which agencies had pending licenses or upgrades to licenses and for the EMS Bureau to make those known at EMSAC. Marc Essary, Licensing Program Supervisor, stated he would bring more specific agency licensing information to future EMSAC meetings.

Air Medical

Mike McGrane presented the subcommittee report.

Minimum Equipment Lists

- On hold due to suspension of rulemaking (agency rule)
- Send draft lists to air services for final review

Statewide Centralized Dispatch

- Discussed statewide centralized dispatch
- StateComm discussed as the centralized dispatch point
- Motion to form subcommittee to explore statewide centralized dispatch
 - Motion was not passed

Coverage Area Maps

- EMS Bureau County Profile project
 - Air medical services dispatch areas not accurate
 - Tied to county of "residence"
- EMS Bureau working with air services to better understand and display actual response areas

Landing Zone Officer Training and Test

- Reviewed training process
 - Training every license cycle
 - Live training every other cycle
 - Test for on-line training
 - 80% passing score

EMSC Subcommittee Report

Rachael Alter presented the subcommittee report.

Member departures (or soon to depart): Kenny Bramwell, MD (Committee Chair & Pediatric Emergency Medicine representative); Lloyd Jensen, MD (Pediatrician representative); Rachael Alter (EMS Bureau, EMSC Program Specialist).

New members: Bill Morgan (Committee on Trauma of the ID Chapter of ACS); Justin Clemons (family representative for children with special needs); Mark Zandhuisen (Career Third Service).

- Grant application for 2011-2012 successfully submitted, approval notification should occur no later than 2/28 (grant start date of 3/1)
 - o Application funding currently at \$130,000 potential for \$10,000 more
 - o Funding requested for simulation training at fourCAH EDs (ISN will match funding for an additional CAH)
 - o Didn't budget for a state-wide pediatric conference, but increased funding for regional conference support

- Personnel Rules will include updates to recertification requirements
- EMR increase from zero to two hours pediatric CEUs
- AEMT increase from four to six hours pediatric CEUs
- Current grant funding remaining in travel budget will be used to purchase pediatric AED pads for Idaho State Police (ISP).
 - Remaining state-wide conference money will be used to purchase EZ-IOs, jump kits and backboards
- Emergency Pediatric Care (EPC) course completed last weekend at Moscow Fire
 - o 34 students from 12 different agencies
 - o Great feedback appreciative students
- EPC course scheduled in Post Falls during the North Idaho Fire Academy (April 16 & 17)
- Pat Tucker reported on her research on AEDs in schools
 - o Pat has had discussions with several states to learn about what has occurred in their areas
 - o Spoke with Representative Mortimer he would like to know what schools currently have AEDs, and schools who are interested in having them
 - o Nothing will happen this session, but will continue with research and outreach for next year.

General Session Discussion

If anyone has connections to high schools, please inquire about interest in having AEDs. The first aid person at Challis Elementary School is not interested in being trained to use an AED.

Center for Disease Control and Prevention National Center for Injury Prevention and Control, Division of Injury Response Visit

CDC will be making a visit Idaho to determine why we didn't adopt their national field triage decision protocol

- Meeting will be held on May 12, 2011.
- Those interested in trauma system development in Idaho are welcome to attend.

Grants Subcommittee Report

(Travis Myklebust absent.)Mark Zandhuisen (acting chair) presented the subcommittee report.

Jim Limieux (Sawtooth Emergency Vehicles) and Rod Doughty (Braun Northwest [Northstar] Emergency Vehicles) discussed the ever changing emergency vehicle changes and how they affect the overall cost.

- Ford E-Series no longer available in diesel
- New standards coming, nothing to worry about now {wait until it actually happens before further discussion for change}

There was discussion and review of the ineligible items list and there were no additions or items to remove. There was also no increase or decrease on the price cap on equipment & vehicles.

- During data entry of EMS licensure renewals, it became apparent that there were discrepancies in the reported FY10 Call Volume
 - This is used in the calculation portion of the grant
 - Higher reported call volumes could have affected the overall award for several agencies
- Application and Instructions were reviewed
- Application reformatted to flow better
- Tourist and migrant request was left off the application this year and will be entered as zero for all agencies. PERCS requirement has been discussed to replace these numbers in the scoring of the application, but a rule change will be required.
- A grants rules task force will be established soon to discuss rule changes.

Subcommittee Motions

Motion "to recommend to keep ineligible items and price caps as they were approved at the October EMSAC" was seconded and carried

Motion made "to recommend no action at this time about discrepancies in call volume in grant and licensure renewal application and carry over to the next grant cycle to review and to advise the agencies of the discrepancies" was seconded and carried.

Motion "to recommend accepting the FY2012 grant application and instructions to carry forward with distribution" was seconded and carried.

General Session Motion

Motion to "recommend accepting the motions of the grants subcommittee" was seconded and carried.

Legislative Activity

Dia reported her testimony to the chairman of Health and Welfare Committee. Last year there were concerns about EMS system authority and the rules approval was postponed due to these concerns. Office of Performance Evaluation (OPE) review was initiated. Their report can be found at www.legislative.gov/ope.

The focus was on shared EMS governance and to give the local governing body authority. The clear message from Senator Lodge was to have a draft to show to the eight associations who are anticipating this action. Senator Vick will marshal the process of looking at this legislation and deciding whether to proceed. The bill will be much more streamlined compared to last year's. It does grandfather those counties under joint powers agreements and has other important points such as revenue. It is attractive because its interest is in moving from licensing of individual agencies to licensing EMS systems. It points to a clear authority of a body to turn to if there is compromise. Also gives opportunity to consider the modifications that our Deputy Attorney General suggested. It would take care of core issues that caused our legislative authority issues in abandoned rules.

Ski patrol also discussed. Will also be encouraging Senator Davis to meet with the EMS Bureau, because they don't really understand the ramifications of that bill language. Geographic boundary is a concern. The amendment is not in the right place if the purpose was to provide immunity. It should not be in the medical practice act.

It is possible for legislators to introduce new bills. Expressed no concern about time constraints.