IDAHO EMSPC MEETING MINUTES

May 9, 2014

A meeting of the Idaho Emergency Medical Services Physician Commission was held on this date at LaQuinta Inn & Suites, 539 Poleline Road, Twin Falls, Idaho.

**Members Present:**
- Mark Urban, M.D.
- Brian O’Byrne, M.D.
- James Alter
- Paul Johns, M.D.
- Keith Sivertson, M.D.
- Curtis Sandy, M.D.

**Member’s Position:**
- American Academy of Pediatrics, Idaho Chapter
- American College of Surgeons Committee on Trauma
- Citizen Representative
- Idaho Bureau of Emergency Medical Services & Preparedness
- Idaho Hospital Association
- Idaho State Board of Medicine

**Members Absent:**
- Murry Sturkie, D.O.
- Veronica Mitchell-Jones
- Maurice Masar, M.D.
- Eric Chun, M.D.
- Ian Butler-Hall, M.D.

**Member’s Position:**
- American College of Emergency Physicians, Idaho Chapter
- Citizen Representative
- Idaho Association of Counties
- Idaho Fire Chiefs Association
- Idaho Medical Association

**Vacant Seats:**
None

**Others Present:**
- Brian Esslinger
- Bruce Cheeseman
- Dave Reynolds
- Dean Neufeld
- Diana Hone
- Jay Wilson
- Season Woods
- Wayne Denny

**Other’s Position:**
- Idaho Bureau of EMS & Preparedness – Program Specialist
- Idaho Bureau of EMS & Preparedness – EMS Section Manager
- Moscow Fire Department
- Idaho Bureau of EMS & Preparedness - Licensing Supervisor
- Idaho Bureau of EMS & Preparedness - Records Lead
- Elmore Ambulance Service
- Idaho Bureau of EMS & Preparedness - EMS Field Coordinator
- Idaho Bureau of EMS & Preparedness - Bureau Chief

Chairman Sandy called the meeting to order at 8:30 a.m.

**Commissioner Sivertson, Idaho Hospital Association, moved and Commissioner Alter, Citizen Representative, seconded the motion to move into closed executive session to review confidential material involving EMS personnel in accordance with Idaho Code § 67-2345(1)(b&f).**

Motion passed unanimously.

**Commissioner Sivertson, Idaho Hospital Association, moved to come out of executive session. Commissioner Alter, Citizen Representative, seconded the motion.**

Motion passed unanimously.
License Action Report
Commissioner Urban, American Academy of Pediatrics, Idaho Chapter, moved to accept motions made in closed session regarding cases 2013-09 and 2014-02. Commissioner Sivertson, Idaho Hospital Association, seconded the motion. Motion passed unanimously.

Approval of Minutes from 2-7-14
Commissioner Sivertson, Idaho Hospital Association, moved and Commissioner Johns, Idaho Bureau of Emergency Medical Services & Preparedness, seconded the motion to accept the draft minutes as submitted. Motion passed unanimously.

Medical Director Education Subcommittee Report
Commissioners and Bureau staff held an EMS Medical Supervision Roundtable the night before the EMSPC meeting for EMS medical directors and agency administrators in Twin Falls. It was a successful evening with 6 agency medical directors and 6 agency administrators in attendance. Commissioners Sandy and Urban, who are also EMS agency medical directors, talked about resources available to medical directors, devices, dealing with personnel issues in a constructive way, and some of the current EMS clinical updates including CPR, spinal immobilization, community health EMS, etc.

It is hoped that more medical directors will be able to attend future Roundtables. Current schedule: Pocatello, July 17, 2014; Boise, August 7, 2014 (the night before the EMSPC meeting); and Idaho Falls, May 7, 2015 (the night before the EMSPC meeting). These meetings are a great opportunity to receive current information, ask questions, rub shoulders with the Commissioners and Bureau staff, and brainstorm with other EMS medical directors.

The Subcommittee was asked to develop an introduction cover letter to send to new medical directors.

Medical Supervision Plan Subcommittee Report
The answers to the questions posed by the Commission regarding medical supervision collected over the last few months on the agency inspection reports were reviewed. There was discussion about what the next step would be to help the rural agencies with the issues they are having with medical supervision.

Commissioner Sivertson, Idaho Hospital Association, moved to request the Bureau staff to create a best practices draft of a medical supervision plan (MSP) for the Commission to review. Commissioner Alter, Citizen Representative, seconded the motion. Motion passed unanimously.

Agency OM Usage Report
Commissioners reviewed the optional module usage report. Tracking and reporting actual OM usage is still challenging. The Bureau field coordinators continue to work with the agencies to try to
get more accurate data. Optional modules have helped meet regional, environmental and community special needs.

**Wildland Fire Update**

Dean briefed the Commission on the initiatives the Idaho Department of Lands (IDOL) was pursuing to prepare to provide EMS during the upcoming fire season. The IDOL solicited RFP’s from Idaho EMS agencies to contract for ambulance and single resource providers that would be entered in the ROSS system as ALS and BLS ambulance services and single-resource-nontransport agencies. The RFP request required contractors to be in compliance with the Bureau’s licensing requirements in order to be considered. This triggered a lot of inquiries, license applications and “wait a minutes” by the private contractors. The large out of state wildland fire contractors were particularly interested because Idaho had more deployments in the western US than anyone else for wildland fires. It is market share, a commercial venture, and when they see that the contractors are required to be in compliance with our rules to get paid and potentially to even be deployed, this gets their attention. It is starting to take shape. The Department of Lands wants to start coming to the EMSPC meetings to make sure that the way they are ensuring medical supervision for wildland fire camps is what the EMSPC expects of them.

**Emergency Medical Dispatch (EMD)**

The EMSPC continues to try to work with the Emergency Communications Commission (ECC) on EMD. It was on the ECC’s strategic plan to establish standards. Chairman Garret Nancolas responded to the last EMSPC letter stating that there are 48 centers, 33 use a nationally recognized and certified form of EMD in Idaho. He stated that the EMD programs currently in use are nationally recognized and accredited and require no further standards to be adopted.

The EMS Physician Commissioners were concerned that there is:

1. No guarantee that the dispatcher sitting at the console has current EMD certification
2. No statue in Idaho law that covers the dispatcher to provider medical care from a liability standpoint or from a practice of medicine standpoint
3. No requirement for medical direction or oversight. It is encouraged by Medical Priority Dispatching, but not required. The EMSPC feel recertification of EMD needs to include medical director certification.

Even though the survey provided by the ECC lists counties and cities that say they have EMD, commissioners and audience members expressed concern that they do not use it all the time, they do not have quality assurance, they do not have a process to evaluate the effectiveness, or a process for improvement.

Audience members noted flaws in the list provided by ECC. They also noted that for most dispatch centers their priority is law enforcement, not EMS. Many do not like medical calls because they do not know what to say and there is no money for training.

As an EMS agency administrator, Dave Reynolds stated that it is difficult to get dispatch to listen to them. He asked if the EMSPC would consider issuing a position statement stating that EMD is of high value to the lifesaving efforts by EMS and perhaps even offer some minimum performance standards. He was hopeful that this might help EMS administrators have some credibility with the dispatch centers.
Dean noted that the new EMS agency licensing rules require dispatch agreements.

**Commissioner Sivertson, Idaho Hospital Association, moved to ask ProQA and APCO to verify the following information about the systems listed by the ECC:**

1. Are they current customers? Do they have a contract with you and use your system or cards?
2. Are their personnel continuously certified by your company?
3. Are these systems accredited by your entity?

A follow up letter from the results would then be sent back to the ECC.

**Commissioner Urban, American Academy of Pediatrics, Idaho Chapter, seconded.**

Motion passed unanimously.

**NASEMSO – Statewide Implementation of an Evidence-Based Guideline Project Update**

The Bureau continues to work on the National Association of State EMS Officials (NASEMSO) Evidence-Based Guideline (EBG) Project and will continue to communicate with them about what the process would look like in Idaho to evaluate and then possibly implement a national evidence-based guideline.

The discussion centered on the fact that when the Idaho EMSPC Protocol Subcommittee developed their statewide protocols, they found that there was not much evidence-based data available. Therefore, they used the consensus of the medical directors and paramedics on the subcommittee to create the Idaho protocols. They feel the Idaho protocols are very contemporary and would be concerned about a national “evidence-based” protocol actually being contemporary. This project is only looking at what the process would be like, not actually requiring implementation.

**NASEMSO Model Protocols**

Chairman Sandy stated that NASEMSO released draft evidence-based Model EMS Clinical Guidelines for both adult and pediatric for review and comment in April.

Chairman Sandy asked that the NASEMSO Guidelines be put on the commissioners’ portal for the subcommittee to review and compare to the Idaho protocols. Some of their references and performance measures may be good to incorporate. Chairman Sandy feels these will probably be the closest thing to an actual “evidence-guided” protocol or guideline available because they have so many resources attached to them with justification for treatment.

The Committee on Trauma has developed a hemorrhage control guideline too that should be reviewed by the subcommittee also.

The NASEMSO Medical Directors Council was also asked to review the Pediatric Prehospital Evidence-Based Guidelines (PEGSUS) draft project in April, developed by Dr. Manish Shah. These will be placed on the commissioners’ portal also so the subcommittee and EMSC has access to them.
Time Sensitive Emergency (TSE) System Update
The legislation passed and will become effective July 1, 2014. The program will live in the Bureau of EMS & Preparedness. A new program manager and part-time AA1 will be hired and Erin Shumard, who is currently the Bureau’s EMS for Children specialist, will move over to TSE. Work is underway for the Governor to appoint the council members and then work will begin on rule writing and establishing the regional committees.

2015 Standards Manual Updates
No proposed changes at this time.

Approve PARF for 2015 changes.
Commissioner Urban, American Academy of Pediatrics, Idaho Chapter, moved to approve the Proposed Administrative Rules Form (PARF) to initiate rulemaking to change the standards manual edition to 2015-1, effective July 1, 2015, and the updated definition for EMS. Commissioner Sivertson, Idaho Hospital Association, seconded. Motion passed unanimously.

Strategic Plan
- Bylaws should be reviewed in August
- Election of Officers will be held in August
- May 8, 2015 meeting will be in Idaho Falls with a Medical Supervision Roundtable the night before
- Review NAEMSP position paper on EMD in August and draft a best practices/dispatch letter (call EMD Position Statement)


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Curtis Sandy, Chairman
Idaho Emergency Medical Services Physician Commission