CALL TO ORDER
Dr. James Smith, Chairperson, called the meeting of the Board of Emergency Medical Services to order at 9:02 a.m. on Monday, September 12, 2016 in the Lighthouse Room at the Country Inn and Suites located at 5353 North 27th Street, Lincoln, NE. The meeting was duly publicized by distribution of the Notice of Meeting and Agenda at least ten (10) days prior to the meeting and posting the agenda at the entrance of the Department of Health and Human Services Division of Public Health at least twenty-four (24) hours prior to the meeting.

Dr. Smith announced that this is a public meeting and the Open Meetings Law is posted.

The following Board members were present at the meeting: Mike Bailey, Randy Boldt, Karen Bowlin, Joel Cerny, Dr. Thomas Deegan, Ann Fiala, Don Harmon, Troy Hiemer, Linda Jensen, Charles LaFollette, Dr. Mike Miller, Carl Rennerfeldt, Dr. James Smith, and Scott Wiebe.

Also present were: Claire Covert-ByBee, Program Manager, Jacye LaFayette-Dymacek, Health Licensing Coordinator, Tim Wilson, Program Manager, Lisa Anderson, Assistant Attorney General, Teresa Hampton, Department Attorney, and Investigators Carla Cue, Russ Fosler, Mendy Mahar-Clark, and Jeff Newman.

Dr. John Bonta was absent from the meeting. Dr. Thomas Deegan arrived after the meeting began.


EMERGENCY MEDICAL SERVICES PROGRAM UPDATES
On behalf of the Emergency Medical Services Program Mr. Wilson shared that the restructuring of his staff has been completed. The number of Regional Specialists was downsized from seven to four. The current Regional Specialists are Carol Jorgensen, Jackie Larrington, Julie Smithson, and Ben Leseberg. Former Regional Specialists Sharon Steele and Doug Fuller have been reclassified as IT positions.
specifically working with eNARSIS. Former Regional Specialist Debbie Kuhn will be overseeing special projects including CISM, EMSC, Lucas Grant, and other projects that may come up. Wendy Snodgrass was selected to fill the Education and Compliance position. An assessment will be going out to all EMS agencies created by the University of Wisconsin. They will analyze the data and provide reports that will hopefully provide us a picture of where we are as well as how we compare to other states that have participated. A job description has been completed for the position to assist with implementation of the Stroke System of Care Act, for which approval is pending. They are moving forward with the creation of a task force to work on the policies, procedures and protocols. They will be looking to the Board to review protocols and provide feedback. Mr. Wilson went on to provide the training agency update. The process for tuition reimbursement has been revamped. Students will submit reimbursement requests directly to EMS Programs instead of going through their training agency. The November leadership 3 & 4 class is full. Applications will be submitted for public health block grants for instructor education and a 2017 leadership class. Doug Fuller shared information regarding the history of eNARSIS. Sharon Steele shared information regarding how version 3 was developed to comply with statutory and regulatory requirements, and how the system itself works. Regional Specialists went out to the services to provide training on the new Elite system. Data has been kept regarding the amount of time taken to complete the reports, and improvements have been made based on feedback from users and the data obtained.

On behalf of the Licensure Unit, Ms. Covert-ByBee shared information regarding process improvement and what is being done to improve EMS application processing. Based on meetings with Mr. Wilson, the decision has been made to shift responsibility for the EMS Model Protocols to the EMS Program staff. In addition, Initial and Audit Service Inspections will now be handled by EMS Regional Specialist. Finally, the coordination for the NREMT skills examination will be handled by Ms. Snodgrass and other EMS Program staff as needed.

Dr. Ernest shared that he is continuing to work on developing a Physician Medical Director Course. Dr. Ernest is also working on drafting a protocol regarding appropriate use of helicopter transport. Dr. Rice, Dr. Ernest, along with some other colleagues had an article published in the British Journal of Paramedic regarding prehospital use of ketamine for cardiac arrest patients that has received positive feedback. Conversations are happening with Mr. Wilson regarding the revamping of the Model Protocols. At the State Trauma Board meeting concerns for future funding for EMS in Nebraska were voiced. There is a desire to have representatives from multiple disciplines come together to advocate for funding and support.

**COMMITTEE UPDATES**

On behalf of the Legislation and Regulations Committee, Mr. Cerny shared that he had heard rumblings that LB325 which dealt with who is responsible for funding for EMS will be put forward again this year. He also wanted to remind everyone that the tax credit bill that was passed last year is in effect already. Services need to keep track of all training records, attendance at calls, and outside meetings because that all goes towards the point system which is required to earn the tax credit.
On behalf of the Services and Providers Committee, Mr. Boldt shared that in relation to discussions regarding EMS as an essential service, he had provided documentation obtained from Wisconsin regarding their EMS funding assistance program.

On behalf of the Education Committee, Dr. Miller shared on June 21, he, Karen Bowlin, Randy Boldt, Brian Monaghan, and Ryan Batenhorst met to discuss the strategic plan follow up from an education perspective. A list of nineteen items were identified that fall into three different categories. He is working on a proposal to bring to the Board which he hopes to bring to the December meeting. This was shared during this time as the EMS Education Strategic Planning Committee was omitted from the agenda. He went on to open a discussion regarding the need to approve an ethics course as there are currently licensees who are out of compliance due to not having a current Board approved course. Dr. Miller floated the idea of having an online course available which would be a viable option to develop for the future.


On behalf of the Scope of Practice Committee, Dr. Smith shared that the rising cost of the EpiPen is causing some services to consider no longer carrying it. He noted that there are programs in place for schools to obtain them at reduced rates, but there are no programs for EMS services. Dr. Miller shared that The State of Washington developed a protocol for providers to have training to draw epinephrine from a vial and administer it to patients who need it. They have kits available with the necessary components and step by step instructions. Dr. Smith requested Teresa Hampton to research what the Board may be able to do to provide other options for providers to use instead of the EpiPen, and that Dr. Miller provide the information from the State of Washington for the Board to review. Ms. Fiala shared information regarding updates to the model protocols and that conversations continue regarding changes that still need to be made. Ms. Fiala asked that any Board member who notices corrections that need to be made to share those with her.

On behalf of the Trauma Board, Mr. Bailey shared that the Trauma Board met on September 9, 2016. On August 28th and 29th, the American College of Surgeons came to complete the Benchmark Indicators for Scoring Assessment (BIS). They did a full overview of the trauma system in Nebraska and created a strategic plan listing the priorities moving forward. Mr. Bailey suggested that inviting a trauma surgeon to attend the EMS Board meetings would be a valuable way to increase the sharing of information both Boards.

On behalf of Emergency Medical Services for Children (EMSC), Dr. Deegan shared that the pediatric emergency training simulation (PETS) course has received approval for the next two years for CEUs for nursing. The hope is to add more simulation cases to the course. The pediatric education for the prehospital providers (PEPP) course was held on September 10th in Niobrara with 18 people in attendance. There is still funding through EMSC to put on PEPP courses throughout the state. The next class will be in Cass County on November 3rd. The next pediatric telehealth training is September 14th covering behavioral emergencies and case studies. CEUs will no longer be available for nurses as the
focus will be more on emergency medical service providers. The next telehealth training will be December 7th called “It CAN happen to you” on safety issues regarding personnel and your patient in the ambulance. Josh Hanes is the presenter whose father was killed in the Weeping Water ambulance crash. EMSC is still participating in the National Pediatric Readiness Assessment that started in 2014. This year the website has been reopened for hospitals to complete the survey. They are hoping to get 100% participation again. There is a plan to put together a credit card size plastic card with a slot on top that would be added behind hospital IDs that will be a quick reference for pediatric vitals and pertinent information. A focus this year is disaster for pediatrics. The plan is to make kits with all the pediatric scenarios and wooden bears painted with chalk board paint which can be used to write children’s ages and vitals on that can be sent out to instructors. They day care flip charts that were created are being requested by groups outside of day cares.

On behalf of the Nebraska Emergency Medical Services Association (NEMSA), Brian Monaghan shared that issues being looked at are EMS funding for the State of Nebraska, essential services and how that can be made a reality in Nebraska, system development, and EMS education and competency. The annual hands-on conference in Kearney will be on January 14-15, 2017. The convention which is moving from Omaha back to Columbus on March 24-26, 2017.

On behalf of the Nebraska State Volunteer Firefighters Association (NSVFA), Mr. Cerny shared that the recruitment and retention grant is coming to an end. An application for a different grant has been submitted with more information coming on that in the future. This weekend the association is hosting a memorial service at the museum in Kearney. Michael Dwyer, secretary/treasurer for the NSVFA, shared that it is clear to the group that funding for EMS as an essential service is not going to be an easy fix as any model picked must work for all areas across the state. Whatever solution that is proposed must have the support of the Nebraska Association of County Officials (NACO) as his proposal last year was to make counties responsible for EMS which NACO agreed with only if it was funded by the State.

**STRATEGIC PLANNING COMMITTEE UPDATES**

On behalf of the Rules and Regulations Committee, Ms. Fiala shared that she and Ms. Jensen have been trying to decide how to best approach the process in an organized and systematic way to do it as efficiently as possible.

On behalf of the EMS as an Essential Service Committee, Mr. Wilson was encouraged to reach out to as many people as possible that are also looking at this issue to get this done together.

On behalf of the EMS Medical Direction Committee, Dr. Ernest had nothing more to share in addition to what was shared earlier in the meeting.

On behalf of the EMS Data Collection Committee, Mr. Wiebe shared the continuing need to obtain funding to support data collection is still high on his list and that funding is an issue across the Board.

On behalf of the EMS Workforce Committee, Mr. Bailey shared that they are considering using both the Firefighters Association and NEMSA to send out information to all the services and squads to try to collect data.
MISCELLANEOUS BUSINESS

Brian Monaghan, Program Director for Simulation in Motion – Nebraska (SIM-NE), shared that Simulation in Motion is currently in South Dakota and North Dakota. Montana was awarded at the same time Nebraska was. Their trucks are complete, and Nebraska’s are currently being built. This program is being funded by the Helmsley Charitable Trust. The intent of the program is not to replace any current education being provided, but to supplement and provide a source of free education to EMS providers and critical access hospitals in Nebraska. Initial education will only be provided if requested. He shared information regarding the equipment that will be available and the types of training that can be provided. Trucks will be located in Scottsbluff, Kearney, Lincoln, and Norfolk and will be able to bring training to areas that may not have the time or funding to attend conferences or other training sessions. The goal is to be able to provide training to anyone who wants it.

The Board broke for lunch at 11:27 a.m. The meeting resumed at 12:30 p.m.

Ms. Covert-ByBee shared information regarding the five-year legislative report that is due on October 1, 2016. In the 2011 report, the data came from the Nebraska Center for Rural Health EMS Workforce Study. For the 2016 report, data from eNARSIS will be used as well as feedback received from the open forums the Board held. Ms. Covert-ByBee requested information from the Board regarding what they want included in the report. Dr. Smith and Mr. Wiebe would like to provide information regarding the lack of funding for EMS. Dr. Miller would like to provide information regarding the changing number of licensed providers in the State. Mr. Boldt would like to provide information regarding the need to emphasize that EMS is an essential service and what types of things need to be supported. There is an overall desire to highlight the things that are being done including grant funding and tax credits. Dr. Smith would like to see a draft of this report.

A copy of the NREMT Adoption of AHA Guidelines was provided for informational purposes.

The NREMT National Continuing Competency Program (NCCP) will start on July 1, 2016. Both ways of tracking continuing education will be available for the individuals who expire on March 31, 2017. After that the NCCP will be the standard. Nebraska is one of the States that recognizes the NCCP. More information is available on the NREMT website.

A copy of NREMT updates was provided for informational purposes. Items included were a continuing education policy change, the implementation of the 2015 AHA guidelines, upcoming fee increase, and new requirements needed for paramedics to qualify to take the NREMT certification examination.

A copy of a letter from the United States Surgeon General as well as a Health Alert Network Advisory issued by the Department of Health and Human Services regarding opioid abuse was provided for informational purposes.

Ms. Covert-Bybee shared information regarding the current conviction review guidelines and a request to update those guidelines. The Board requested to see a copy of the conviction review guidelines adopted by the Board of Nursing.
After discussion, Dr. Miller moved, seconded by Mr. Bailey to approve removing MIP from the list of convictions that automatically requires a chemical dependency evaluation unless there is a pattern that the Department feels warrants such evaluation for potential Board review. Voting aye: Bailey, Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Hiemer, Jensen, LaFollette, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta. Motion carried.

Ms. LaFayette-Dymacek shared that Emergency Medical Responders, Advanced Emergency Medical Technicians, Emergency Medical Technician – Intermediates, Paramedics, EMS Instructors, and Basic and Advanced Services will all expire on December 31, 2016. Notices will be sent out in October to all licensees in these categories. In the past, the Board has requested an audit of 3% of all licensure types.

After discussion, Mr. Rennerfeldt moved, seconded by Mr. Boldt to continue to audit 3% of all licensure types. Voting aye: Bailey, Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Hiemer, Jensen, LaFollette, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta. Motion carried.

Ms. Covert-ByBee gave a status update regarding the rules and regulations process. The goal is to have all three chapters placed in the new Department templates and provide those to the Rules and Regulations Committee. Mr. Wiebe expressed concerns regarding the prescriptiveness of the current rules and regulations and how they limit the ability of licensees to practice using the most current equipment or procedures.

Ms. Covert-ByBee shared that emails had been sent to all Board members whose terms are expiring on December 1, 2016. There was a brief discussion regarding the legislative changes to the makeup of the Board which may impact current members.

Dr. Smith asked for an update regarding the budget as it pertains to the Board of Emergency Medical Services. Currently, there is still a freeze on general fund spending which is where funding for this Board comes from. The discussion included details on what the proposed budget for next year is and what that pays for along with options for alternative funding sources.

Ms. Covert-ByBee shared information regarding updates to the EMS website. Discussion was held regarding the method of sharing changes/updates to the EMS community.

A copy of the application process report was shared for informational purposes only.

If any Board member has information they would like to discuss at the next meeting, please share that with Ms. LaFayette-Dymacek at least 15 days prior to the meeting.

Mr. LaFollette moved, seconded by Ms. Bowlin to go into closed session at 2:14 p.m. to hear discussions regarding confidential information and to protect the reputation of individuals named or referenced in such discussions. Voting aye: Bailey, Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Hiemer, Jensen, LaFollette, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta. Motion carried.
Dr. Miller moved, seconded by Mr. Rennerfeldt to return to open session at 4:05 p.m. Voting aye: Bailey, Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Hiemer, Jensen, LaFollette, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta. Motion carried.

DECISIONS

After discussion Dr. Miller moved, seconded by Mr. Bailey to offer Dennis Reese a probationary license based on action taken against his pharmacy license consistent with the terms and conditions imposed by that Board to end on January 8, 2019. Voting aye: Bailey, Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Hiemer, Jensen, LaFollette, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta. Motion carried.


ADJOURNMENT
There being no further business, the meeting adjourned at 4:11 p.m.

Respectfully submitted,

Scott Wiebe, Secretary