

## **Minutes of the July 13, 2018 Board of Emergency Medical Services Meeting**

Dr. James Smith, Chairperson, called the meeting of the Board of Emergency Medical Services to order at 10:01 a.m. on Friday, July 13, 2018 in the Ruby 7 Room at the Younes Conference Center located at 416 W Talmadge Road, Kearney, Nebraska. 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, Dr. John Bonta, Karen Bowlin, Joel Cerny, Ann Fiala, Troy Hiemer, Linda Jensen, Dr. Mike Miller, Carl Rennerfeldt, Dr. James Smith, and Scott Wiebe.

Dr. Thomas Deegan and Don Harmon were absent from the meeting.

Also present were: Claire Covert-ByBee, Program Manager; Laura Huggins, Health Licensing Specialist; Tim Wilson, Program Manager; Lisa Anderson, Assistant Attorney General. Investigators Kathleen Kruger and Mark Myerson joined by conference call.

Miller moved, seconded by Bailey to adopt the agenda. Voting aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Deegan, Harmon. Motion carried.

Hiemer moved, seconded by Bailey to go into closed session to hear discussions regarding confidential information and to protect the reputation of individuals named or referenced in such discussions. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, Wiebe. Voting Nay: None. Absent: Deegan, Harmon. Motion carried.

Rennerfeldt moved, seconded by Bowlin to go into open session. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, Wiebe. Voting Nay: none. Absent: Deegan, Harmon. Motion carried.

Wiebe moved, seconded by Fiala to recommend issuing an EMS Advanced Service: Transport license to Ashland Emergency Service. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, Wiebe. Voting Nay: none. Absent: Deegan, Harmon. Motion carried.

Bailey moved, seconded by Wiebe to recommend issuing an EMS Advanced Service: Transport license to Aurora Fire Department. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, Wiebe. Voting Nay: none. Absent: Deegan, Harmon. Motion carried.

Hiemer moved, seconded by Boldt to recommend issuing an EMS Advanced Service: Transport license to HCA HealthONE LLC dba AirLife. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, Wiebe. Voting Nay: none. Absent: Deegan, Harmon. Motion carried.

Bonta moved, seconded by Rennerfeldt to recommend issuing an EMS Basic Service: Non-Transport license to Hendry Doorly Zoo. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, Wiebe. Voting Nay: none. Absent: Deegan, Harmon. Motion carried.

Jensen moved, seconded by Bailey to recommend the reinstatement of an Emergency Medical Technician license to Kylee Sparano. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith. Voting Nay: none. Abstained: Wiebe. Absent: Deegan, Harmon. Motion carried.

Wiebe moved, seconded by Bailey to approve Dr. Smith reach out to the physician medical director of the Ashland Emergency Service regarding recommended protocols. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, Wiebe. Voting Nay: none. Absent: Deegan, Harmon. Motion carried.

Tim Wilson, Program Manager of the Office of Emergency Health Systems (OEHS) provided an update. Information included:

- The Western Regional Emergency Medical Specialist position is open.
- Seeking an upgrade to an Administrative Assistant position.
- Trauma Regulations have been submitted to legal for review.
- Critical Incident Stress Management conference will be held August 11<sup>th</sup> and 12<sup>th</sup>
- Three grant applications will be submitted: 1. Opioid provider mental health, 2. MediCare Technician Assistance, 3. Physician Drug Monitoring Program and EMS.

Wendy Snodgrass, EMS Education Compliance Manager shared the following:

- Expended almost all of the available budget for tuition reimbursement.
- Low request rates for Continuing Education classes/presentation.
- Patient Safety course was not held in June due to lack of enrollment. Will established date in the future.
- Close to re-launching 24/7 EMS.
- There are nine training agency site visits scheduled for 2019.

Claire Covert-ByBee, Program Manager shared the following:

- Hired a Health Licensing Specialist.
- Still seeking to fill a Health Licensing Coordinator position.
- Provided the Application Processing Report

Dr. Smith provided the Physician Medical Director update on behalf of Dr. Ernest. Information included:

- Continuing to investigate different educational opportunities for physical medical directors.
- Meeting scheduled in mid-July for the Stroke Advisory Committee to move the state-wide stroke initiative forward. Additional report will be made at next EMS Board meeting.
- Has submitted an application to the ACGME for UNMC EMS fellowship. More details to follow.

After discussion Fiala moved, seconded by Bailey, to approve Dr. Smith in writing a response to the letter writer requesting that the Board review the administration of nitroglycerin by EMTs. Voting Aye: Bailey, Boldt, Bonta, Bowlin, Cerny, Fiala, Hiemer, Jensen, Miller, Rennerfeldt, Smith, Wiebe. Voting Nay: none. Absent: Deegan, Harmon. Motion carried.

Information was shared regarding the membership of the Board of Emergency Medical Services. The 17-member Board only has 14 positions currently filled. There is a need for public members in this, and most professional boards. Interested individuals should contact Monica Gissler at DHHS for more information.

Discussion around data mining and reporting of information occurred. More information and discussion is needed in order to develop a specific view of what data is needed.

The Board went to *Comments from the Public* as indicated later on the agenda in order to accommodate the scheduled public forum at the State EMS Conference. Dr. Jim Smith welcomed the group of EMS participants and thanked them for the valuable service and dedication they provide for the State of Nebraska.

Each EMS Board Member and each DHHS Staff member gave their own introduction to include their role on the Board or in the Department and their own qualifications for that role. There were repeated expressions of gratitude from each member and extended to the EMS participants attending.

The session was opened to questions and discussions as determined by the participants and with comments from the Board and Department.

**The first question was “Will there be online EMT training which would include a start to finish entire on-line EMT course?”**

It was answered that there are those courses already in existence in the Southeast, Pan Handle and Scotts Bluff areas of Nebraska.

**It was asked “why can’t all EMS instructors be allowed to teach the Add on Modules?”**

It was answered that the EMS Instructor must go through a training agency to be able to teach the extra modules. Also it was pointed out that the Add on Modules except for IV module will be going away with the latest legislation updates.

**There was a question about what lab techs might be able to do to help a squad...since the lab tech can do accu-checks at their workplace can they do accu-checks on the rescue squad similarly to what RN’s and LPN’s can do on a squad with medical director approval.**

It was explained that the lab techs are not covered to do this in the field.

**There was a question regarding the implications of Replica and how this would affect practices.**

It was answered that July 19, 2018, the new legislation would formally go into effect. However, there will need to be rules and regulations developed and this will take some time. More information will be forthcoming.

**There was a question and concern regarding the new requirement of having all EMS instructors to maintain their own National Registry status. This change was thought to perhaps be a limiting factor and may discourage the current instructors from continuing in that role. The concern was that we may be losing some very valuable instructors who currently are able to maintain high pass rates for their students with National Registry and yet they do not possess National Registry themselves.**

It was explained that over the past several years we have heard many concerns about the National Registry pass rates in Nebraska being below what we desire and we have heard requests for more accountability from the EMS instructors across the board.

It was also explained that the intent was to grandfather all existing EMS instructors and then any new EMS instructors would be required to have and maintain National Registry status.

**There was a question regarding how we can assure active involvement and accountability for EMS Medical Directors.**

It was answered that we need to have Medical Directors who possess and maintain a high level of accountability. Dr. Jim Smith suggested each service should select a Medical Director and then define the relationship with clear expectations for both sides. Some services are now writing contracts with their medical directors in order to increase the level of medical director accountability.

There will be EMS Medical Director Continuing Education Hours required as a part of the new legislation.

**There was a request from the participants to make the completion and Electronic Filing of patient care reports easier and it was stated that 72 hour turn around time for submission was noted as being difficult to accomplish for many services.**

DHHS members explained about the necessity of good data and the promise to utilize the data in a meaningful manner. Additionally, the DHHS members encouraged feedback and suggestions for improvement of the electronic patient care reports. Participants were encouraged to contact one of the EMS Specialists to come out to work with the individual services. Services may call Brad Harm, Sharon, Doug or Tim for assistance.

**There was a question regarding the possibility of auto-hiding ALS information on the electronic patient care report form if the call is BLS only. It was thought this would make documentation much easier to complete in a more timely fashion.**

Tim indicated the visibility rules allow auto-hide and there will be more discussion on this.

**Concern was expressed about the difficulty of entering the list of patient home medications on the electronic patient care report form. It now requires selecting "other" and then typing in the name of the other medication if it is not found in the selections provided. This is perceived as a lengthy process which takes much time to complete.**

Tim explained that the medications listed are part of a National Data Base Software program and therefore are somewhat fixed. However, if there are additions please send the individual drug names to Tim and they can be added. Tim also added that the dose and frequency columns may be added if desired. Please contact his department about this for further directions.

**Question about the education and training needed by a physician in the community who wants to respond with the squad.....do they need additional training?**

The answer was no they do not need additional classes and they may function on the squad to the level of service the squad is licensed for.

**The question was asked about where the EMS Board Minutes can be found and how soon after the meeting will they be available.**

Claire answered this question and gave explanation of requirements of Open Meeting Law regarding minutes.

**The question was asked about role of EMR and discussion took place regarding that currently the EMR may do Manual BP but not automatic and may do Manual CPR but not use the Lucas devices.**

Explanation was given by the Board that efforts have been made to encourage a broader approach to defining the scope of practice for each EMS role to allow for growth and expansion with the advent of new technology. Hopefully, in the future we can avoid some of the practice issues we have experienced which have been somewhat limiting at times.

**There were questions about Services License Renewal.**

It was explained that there would no longer be every 2 year renewal for the individual services. Instead there will be an inspection every three years. The QAR form will not be required to be submitted every 2 years as it has in the past. This change with regard to Service License Renewal is in effect as of July 19, 2018. There will NOT be renewal of Service Licenses in December 2018.

#### **QAR**

Dr. Bonta explained to the group that as a medical director for many services in Nebraska he finds the QAR form to be very helpful in assuring accountability. He plans to continue to use it as a guide and resource in the future.

#### **CARES Registry**

Scott Wiebe described to the participants the benefits of joining the registry for CARES: Cardiac Resuscitation Registry to track outcomes. He encouraged services to sign up at

[www.mycares.net](http://www.mycares.net) to participate in an excellent program which will provide and calculate outcomes for cardiac resuscitation in the State of Nebraska and compare with other states and localities. Scott thanked Becka Neumiller for her commitment to the program and outstanding work with development in Nebraska.

### **Training Agencies**

In response to participant question regarding some classes needed or changes in classes and content for EMS, Mike Miller encouraged all participants to reach out to their respective/local training agencies to request and/or discuss needed changes or desired assistance in order to affect changes.

### **Epi-auto Injector**

It was explained that this has been a frustrating issue and has to do with current rules and regulations issues and will hopefully be fixed with writing of the new rules and regulations which may be done within approximately a year.

### **Gratitude to the Board Members**

The final comment came from a medic who stated he wanted to thank the entire board for spending time to be at EMS conference and for volunteering many hours to EMS.

The Board returned to a smaller setting and resumed the agenda items with *Publishing of Training Agency Pass Rates*.

Discussion of publishing training agency pass rates occurred. The Board indicated it would like to see pass rates from individual training agencies published, as opposed to the State averages. Additionally, discussion regarding adding this as a requirement in the regulations occurred.

Tim Wilson provided an update on the 407 process for adding a Critical Care Paramedic license. The application can be found on the Department's website.

Tim Wilson provided an update on LR 395, and the information that he had available to him. He has offered his assistance and provided his information to Senator Bostleman.

Claire Covert-ByBee provided the Board with information regarding LB 299, which provides the ability for an individual with a criminal history to apply to any occupational Board before attending any educational programs to determine if their criminal history would disqualify them from a license.

Claire Covert-ByBee provided the Board with an update on the implantation of LB 1034; including information regarding REPLICA, new application requirements, and the next steps in regulation review. The Board's subcommittee will meet with DHHS staff to review the latest revision of the three chapters of regulations. This meeting will occur on July 31, 2018.

The Board was instructed to submit any topics for the next Board meeting to Claire Covert-ByBee.

There being no further business, the meeting was adjourned at 4:00 p.m.

Respectfully submitted,

Scott Wiebe, Secretary