

**Minutes of the
Board of Emergency Medical Services
December 12, 2014 Meeting**

CALL TO ORDER

Tim Hoffman, Chairperson, called the meeting of the Board of Emergency Medical Services to order at 9:00 a.m., Friday, December 12, 2014 in Country Inn and Suites – Lighthouse Room 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.

Mr. Hoffman announced that this is a public meeting and the Open Meetings Law is posted.

The following Board Members and Staff were present at the meeting:

Tim Hoffman, Chairperson	Randy Boldt
Ann Fiala	Troy Hiemer
Joel Cerny, Vice-Chairperson	Rene Tiedt, Program Manager
Scott Wiebe, Secretary	Dr. Deegen
Dr. Mike Miller	Dr. Smith
Carl Rennerfeldt	Judy Henning
Karen Bowlin	Jacye LaFayette-Dymacek, HLS

Dr. Bonta, Linda Jensen and Charles LaFollette were absent from the meeting.

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

Mr. Harmon joined the meeting at 9:03 a.m.

Ms. Fiala moved, seconded by Rennerfeldt to approve the minutes from the September 12, 2014 meeting. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, and LaFollette. Motion carried.

EMERGENCY MEDICAL SERVICES PROGRAM UPDATE

Dean Cole, Program Manager, EMS Programs reported his program is embracing and implementing the CARES program dealing with cardiac arrest. He applied for grant for Lucas Device grant through the Helmsley Foundation to obtain Lucas Devices for Nebraska ambulance services. . The grant will be available to the whole state but does not include Omaha. He has requested an interpretation of whether the exception is for the City of Omaha or does Omaha mean all of Douglas County. EMS Programs must submit work plan and budget approval to Helmsley Foundation by January 15 for final approval. Also, a strategic planning meeting will be schedule to revamp EMS program's responsibilities and will likely result in changes to their work and focus on the future. Dean's goal is to have a statewide cardiac plan similar the statewide STEMI and Trauma plans currently in place. By the next time the EMS Board meets he may have an update to report.

Brian Monaghan, State Education and Training Coordinator reported on EMS Training Agency Updates. Monaghan recognized participation by the training agencies in not only the EMS Board meetings but also the EMS Training Agency Association meetings that occur twice a year. He provided an update on where training agencies are with initial education pass/fail rates. He stated most are on an upward trend and overall statewide pass rates are above the national average. There are some programs in our state that are not up to the 70% average pass rate as required in 172 NAC 13. Brian reported he contacted the NREMT for information on Nebraska providers and that 40% of Nebraska's EMS Providers hold the National Registry of Emergency Medical Technician (NREMT) certification. Both the EMR and EMT levels are at about 40% and paramedics are at 63%. He looked at the percentage of EMS providers who have not yet transitioned from the old scope practice such as the EMT-B. Approximately 40% of the EMRs have not transitioned; nearly all EMTs have, and 47% of the Paramedics have not. There is still opportunity to transition. Depending on category, transition will be available for some through 2015, 2016 or 2017. Nebraska's Out of Hospital Emergency Care providers are not required to maintain their NREMT certification and the transition affects only those who want to maintain the national NREMT certification. Brian presented a report of the time span between when EMS students complete their course and take the pass the NREMT examination. He asked what is there that can be done to encourage students to test soon after they complete their course. The NREMT has announced that once student receive their authorization to test the NREMT examination, they will have 90 days to do so. If they do not, they forfeit all testing fees and must re-register and pay for the test. Statistics show that students who test soon after course completion have a higher pass rate than those who delay taking the test. Brian reported the training agency association meets quarterly and included- 1-2 face to face meetings per year with the next one scheduled in March. This group is working on goals for the group. They will be networking more related to the psychomotor skills exam for the EMR and EMT levels. The group requested that the board consider at their next meeting suctioning from a Combi-tube or King Airway. These devices come with a suction tube but should it become blocked with mucous or vomit should it be pulled and replaced, or should the common sense approach be used and it be suctioned? This question will be referred to the Scope of Practice Committee for review and possible discussion at the next meeting. Mr. Monaghan indicated he would be willing to speak further with the committee.

COMMITTEE UPDATES

Mr. Hoffman reviewed the current committee assignments and asked all members to consider which committees they wish to serve on for 2015. Any questions or desire to change committee assignment should be referred to the EMS Board Chairperson.

Mr. Cerny stated he did not have anything to report other than he believes there will be a lot that the committees and the board may need to discuss once the Nebraska legislature is back in session. He stated he has heard rumor there may be a senator from the northeast part of the state who will introduce legislation to do away with the National Registry of Emergency Medical Technicians (NREMT) examination as the licensure examination for Out of Hospital Emergency Care Providers in Nebraska. Ms. Tiedt reported that the most common inquiry she responds to

for the Governor and senators is related to complaints that the NREMT examination is too difficult for some individuals to pass. Tiedt stated DHHS Division of Public Health does not have any interest in going back to a state administered licensing examination.

Ms. Fiala stated that she wanted to be sure the board is thinking ahead about Community Para-medicine and possible licensure designations for Community Care Paramedics and Critical Care Paramedics as we consider future regulation changes.

There was a brief discussion about educational opportunities that have or will be available. Ms. Tiedt shared the updated Tuition Reimbursement Policy and reiterated that reimbursement is available to through the contracted EMS Training agencies and for individuals who hold a Nebraska Out-of- Hospital Emergency Care Provider license and are volunteers or employees of a Nebraska licensed EMS Service.

Ms. Fiala reported the committee proposed to the Board that they consider where the training for the 12 lead EKG fits best. After discussion, the consensus at this point is to not make it part of initial training, but rather offer it as a module class and/or allow the service PMD to train service members and then decide if they are competent to use the equipment. This will be discussed further by the Scope of Practice Committee and then discuss this further at the next EMS Board meeting. Ms. Fiala stated that she also wanted to be sure the board is thinking ahead about Community Para-medicine and possible licensure designations for Community Care Paramedics and Critical Care Paramedics as we consider future regulation changes.

Mr. Hoffman reported the Trauma Board is looking at going through a strategic planning process to determine where the Trauma system needs to go from here. The Trauma Board has requested the Board of EMS develop a policy regarding use of backboards and get back to them. Mr. Cole spoke briefly about the progress in identifying area trauma centers and encouraging EMS squads to transport to those centers. Mr. Cole stated there are still a number of critical access hospitals out there using up the "Golden Hour", by directing services to take trauma patients to the area hospital first or failing to use available air transports to get patients to an identified trauma center directly from the scene. Cole will also be reviewing the numbers of advance level providers working in or with hospitals in Community Para-medicine role.

Dr. Deegan reported about updated PEP-pediatric emergency focused courses being rolled out. These courses will be available online which will help to decrease time needed to attend since there is no travel required. The issue of EPI-PEN and asthma /anaphylaxis is still under review. Also, as part of the EMSC grant and the National Pediatric Readiness Project there will be a panel discussion in Washington State which will look at the rural aspects of pediatric emergency preparedness and to review our data.

NEMSA is working hard on upcoming conferences to be held in Kearney and Omaha. EMS providers in neighboring states are being invited to attend the conferences.

Mr. Cerny reported NSVFA hosted an annual conference in October in North Platte. He has been elected to the National Volunteer Fire Council as an alternate and he is actively pursuing

his placement on their EMS Committee. NSVFA will host "Fire School" in May and there will be EMS training offered there which will include the firefighter rehab class.

MISCELLANEOUS BUSINESS

Shawn Baumgartner of Valley Ambulance provided a brief report on the success of the community para-medicine study completed in the in the Scottsbluff area. A written report was provided to the board. Board members asked follow up questions about the types of conditions or procedure the patients visited had, the challenges they faced, and lessons learned. Ms. Fiala asked about how their project was perceived by the Home Health Agencies and providers. Baumgartner indicated "home health" was one of their partners from the very beginning of the study and were supportive. Baumgartner stated there is a movement and national study underway to address how to reimbursement payments could be made for service provided under the community para-medicine model. This is also a resource issue especially in rural areas. Use of existing emergency medical professionals to provide routine follow ups will free up the limited supply of nurses fill other health care needs. Hospitals are seeing that there is need to work more closely with EMS services to see that appropriate care patient care is provided before arrival at the hospital.

Mr. Baumgartner asked the board to consider future requirements for the multiple ambulance standards in Nebraska. He stated there are at least three organizations that are have national recommendations and requirements for ambulance design and crash safety. In the United States the ambulances continue to grow in size yet in much of the rest of the world emergency care vehicles are getting smaller. The national standards do not allow for creativity in design and usage. Furthermore, he believes Nebraska EMS services need to have the flexibility to work with manufacturers to design a vehicle that is safe, fits their needs, and is more cost efficient than those that meet all the required national standards. Baumgartner provided the board with a written document with his suggestions to consider for future ambulance design requirements. Mr. Wiebe, Chair of the EMS Board- Ambulance Standards Committee shared information and statistics to support continued national requirements for ambulances in Nebraska. He pointed out that the Nebraska EMS Board does not have the expertise to develop ambulance design standards nor are they willing to take on the liability. All information presented will be considered in future development of Nebraska regulations for ambulances.

After discussion, Dr. Smith moved, seconded by Ms. Fiala to accept the Mission Lifeline NE Draft and Proposed EMS Model Protocol – Inter-facility Language documents together. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, and LaFollette. Motion carried.

After discussion, Mr. Boldt moved, seconded by Mr. Rennerfeldt to make the 12 Lead EKG training course for EMRs an additional module that can be taught by a subject matter expert and to approve the STEMI guidelines with the proposed changes. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, and LaFollette. Motion carried.

Ms. Tiedt requested the Board's opinion on how they wanted the Board meetings to be publicized. Currently the agenda is posted to the DHHS website, outside of the Department offices and e-mailed to all interested parties. The consensus of the Board was to continue these methods of publicizing the meetings.

Ms. Tiedt informed the Board that the duties and responsibilities of the Board and Staff are being updated. This was for informational purposes only.

After discussion, Mr. Boldt moved, seconded by Mr. Rennerfeldt to retain the following slate of officers for 2015: Tim Hoffman-Chairperson, Joel Cerny-Vice-Chair, and Scott Wiebe-Secretary. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, and Smith. Voting nay: None. Abstaining: Wiebe. Absent: Bonta, Jensen, and LaFollette. Motion carried.

After discussion, Mr. Boldt moved, seconded by Mr. Harmon to name Dr. Bonta, Dr. Miller, and Dr. Deegan (for pediatric related cases) as the Investigative Consultants. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, and LaFollette. Motion carried.

The Board discussed scheduling of the 2015 meetings. Due to scheduling conflicts the pre-planned dates for both the March and June meetings are in conflict with many board member schedules. Ms. Tiedt will search for alternate dates and confirm those with the board. Meeting dates that were confirmed are September 18, 2015 and December 11, 2015. All meetings in 2015 will be held at 9:00 a.m. in the Lighthouse Room of the Country Inn and Suites located at 5353 North 27th St. Lincoln, NE 68521.

After discussion, Mr. Wiebe moved, seconded by Mr. Rennerfeldt to audit three percent of all license types and services. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, and LaFollette. Motion carried.

Ms. Tiedt provided the Board a report that showed the number of applications that were currently being processed for licensure; licenses that were issued by the Department; and applications that were denied since on August 26, 2014. This was for informational purposes only.

Ms. Tiedt informed the Board that as of that morning 80 out of 430 services have not completed the QAR process; 26 of those 80 have submitted something and have received feedback regarding what is still required, which leaves 54 services that have not submitted anything. Ms. Tiedt reminded the Board that this report was sent out February 2, 2014 and is part of the renewal process which means that any service that has not submitted a compliant QAR by December 31, will not be able to operate starting January 1. Any service that expires must go through the initial application process which includes being inspected.

Mr. Harmon moved, seconded by Ms. Fiala to reaffirm the mail ballots for licensure of Morrill County Community Hospital to operate as an Advanced Life Support Transport Service; and James McGinnis to practice as an Emergency Medical Responder. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, LaFollette, and Smith. Motion carried.

CLOSED SESSION

Dr. Miller moved, seconded by Ms. Fiala to go into closed session at 1:10 p.m. to hear discussions regarding confidential information and to protect the reputation of individuals. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, and LaFollette. Motion carried.

OPEN SESSION

Ms. Fiala moved, seconded by Mr. Hiemer to return to open session at 2:34 p.m. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, and LaFollette. Motion carried.

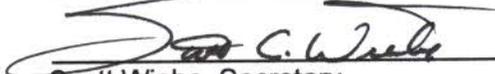
DECISIONS

Mr. Harmon moved, seconded by Mr. Boldt to approve the Cass County Emergency Management Agency's application for licensure as an advanced life support non-transport service pending submission of all documentation. Voting aye: Boldt, Bowlin, Cerny, Deegan, Fiala, Harmon, Henning, Hiemer, Hoffman, Miller, Rennerfeldt, Smith, and Wiebe. Voting nay: None. Absent: Bonta, Jensen, and LaFollette.

ADJOURNMENT

There being no further business, the meeting adjourned at 2:40 pm.

Respectfully submitted by:



Scott Wiebe, Secretary

Prepared by: Rene' Tiedt, Program Manager