

**NH EMERGENCY MEDICAL & TRAUMA SERVICES
COORDINATING BOARD**

**Division of Fire Standards and Training & Emergency Medical Services
Richard M. Flynn Fire Academy
Concord, NH**

**MINUTES OF MEETING
(approved)
May 21, 2015**

- Members Present:** Grant Turpin (Chair); Susanna Ayers, Michael Cloutier, Jason Grey, Mike Harnois, Frank Hubbell, Eric Jaeger, Jeremy LaPlante, Stacy Meier, Chad Miller, Richard Murphy, Richard O'Brien, David Strang, and Jeremy Thibeault (14)
- Member Pending:** John Seidner
- Members Absent:** Doreen Gilligan, Richard Montmeny, Greg Placy, Peter Row, Eric Schelberg, Helene Zielinski
- Division Staff:** Director Deborah Pendergast, Bureau Chief Nick Mercuri, Deputy Chief Jon Bouffard, Captains: Vicki Blanchard, Kathy Higgins-Doolan, Shawn Jackson; Investigation Specialist: Richard Cloutier; Administrative Assistant: June Connor
- Guests:** Aaron McIntire, Pamela Drewniak, Fred Heinrich, Jeanne Erickson, Steve Erickson, Scott Schuler, Richard Riley, Clay Odell, Janet Houston

NOTE: "Action items" are in bold red.

I. Call to Order

Item 1. Welcome

The CB meeting was called to order at 1:00PM by Chair Grant Turpin. A quorum was present (14 voting members present).

Item 2. Introductions and Disclosures

Members and guests introduced themselves.

Happy EMS Week!

New Coordinating Board members:

- Dr. Rick Murphy – representing the American College of Surgeons

- Dr. John Seidner – pending representative from the TMRC
- Public member – no one yet

Cancellation of special meeting:

The special meeting, scheduled for April 30, 2015 to discuss a rule allowing law enforcement to carry Narcan, was cancelled because it did not meet the requirement for posting at least 24 hours in advance; any vote taken would not have counted. Chair Turpin also considered if this would be an emergency meeting, but it did not meet the definition as such.

Chair Turpin apologized and expressed his appreciation to those who were on board to help.

II. Approval of the Minutes

Item 1. March 19, 2015

Motion made by Jeremy Thibeault; seconded by David Strang: The CB approves the minutes from the March 19, 2015 CB meeting as corrected in V, Item 1, NOTE OF CLARIFICATION, RE Section (q), to read....”the division shall also notify the National Registry of Emergency Medical Technicians, National Practitioner’s Data Bank and the Center for Medicare, Medicaid Services of any unit or provider license revocation, suspension, or limitation.”

The motion was passed unanimously.

III. Committee/Board Reports

Item 1. NH EMS Medical Control Board Report – F. Hubbell

Dr. Hubbell gave a summary of the MCB meeting this morning (May 21, 2015).

Here is the link to the draft of the minutes from that meeting:

<http://www.nh.gov/safety/divisions/fstems/ems/boards/medicalcontrol/mbminutes.html>

Eric Jaeger gave a presentation on the aging population in NH and its effect on EMS; he will ask to be on the CB agenda for the July 16th meeting.

The next MCB meeting will be on July 16, 2015 at 9AM.

Item 2. TMRC Report – J. Bouffard

Deputy Chief Bouffard gave a summary of the TMRC meeting on April 15, 2015.

Here is the link to the draft of the minutes from that meeting:

http://www.nh.gov/safety/divisions/fstems/ems/boards/traumamedicalreview/trauma_minutes.html

The next Trauma Conference is on November 5 & 6, 2015 at the North Conway Grand – save the date!

There is an opening on the TMRC for a medical examiner; suggestions are welcome.

Eric Jaeger would like to speak to the TMRC regarding bariatric trauma issues and how this can be integrated into the process for evaluating hospitals.

A suggestion was made to study what other states are doing.

The next TMRC meeting is on June 17, 2015 at the NH Fire Academy.

IV. Report of the Bureau Chief of EMS – N. Mercuri

Happy EMS Week! Bureau Chief Mercuri expressed his appreciation for everything that EMS providers do.

National Association of State EMS Officials (NSEMSEO)

“**EMS Compass**”, an initiative from NHTSA and NSEMSEO, is a project to develop meaningful assessment of performance measures for EMS providers. Hopefully, this will work into value-based reimbursement that is coming in the future. They are accepting feedback on their website until the end of May regarding quality measures (emscompass.org).

This project is supposed to be completed by September, 2016.

EMS Voluntary Event Notification Tool (EVENT):

This is an anonymous reporting system to a third party of patient near-misses or mishaps, including equipment failures and violence against EMS providers.

[EVENT quarterly reports](#) are provided (A copy of the most recent report was passed around.) If time critical issues come up, they will contact the Bureau before the report comes out, so that the Bureau can have time to take action. **The EVENT links are now up on the TEMSIS page, and Todd Donovan is working to get them up on the Bureau website.**

[Recognition of EMS Personnel Licensure Interstate Compact Agreement \(REPLICA\)](#)

This is similar to the Nursing Compact; NSEMSEO has come up with some model legislation to allow cross-border working on the same license. The option of bringing this to NH is being explored.

Legislative:

- HB 270: granting immunity to people reporting drug-related emergencies; passed both the House and the Senate.
- HB 271: expands the use of Narcan to family members and substance abuse programs; passed both the House and the Senate.

Line of Duty Death: Stacy Meier and Nick Mercuri will be spending time fact-finding this summer in preparation for possible legislation in the fall.

Award nominations: Please submit your nominations for the fall for the Pamela Mitchell/Richard Connolly Award and the Bound Tree Corporation Award. Nominations should be submitted to Kathy Higgins-Doolan on or before June 1, 2015.

Protocol roll-out:

This is on its way but will be delayed due to the loss of two employees who were working on the project. It should be ready within 3 weeks.

MIH:

- Bureau Chief Mercuri and Director Pendergast attended a presentation this morning (May 21, 2015) given by [Matt Zavadsky](#), entitled “*Home Health & EMS-Based Mobile Healthcare – Match Made in Heaven or Shotgun Wedding?*” He emphasized the importance of collaboration between EMS and home care.
- The MIH protocol is finished and the rule has been filed with DHHS. The public comment period was 2 weeks ago, so we are now waiting for the rule to get filed with JLCAR. This process should be complete within 90 – 120 days.

V. Old Business

Item 3. Education Section update – S. Jackson / N. Mercuri (out of order)

Now that the busy season is over, the focus is shifting to getting ready for next season. The following is a list of tasks and goals:

- We are hoping to hear soon about whether or not a grant has come through for an ambulance and OB simulator; these will be great additions to our simulation program.
- There will also be a focus on monthly continuing education breakfasts. **Dr. Suozzi will be presenting at 8:30AM on June 3rd (“[High Functioning CPR, the Pit Crew & Beyond](#)” under “**Continuing Education**” sub-heading.)**
- We are also looking at streamlining the practical exam process. Intermediates who have AEMT transitioned: exam results have not changed from a percentage perspective, with a 64% first time pass rate and a 75% overall pass rate.
- Deadline for EMT Intermediates: March, 2016 is the deadline for those who have even-year expirations. The Bureau will focus training efforts to make sure that everyone knows about these requirements. People will have 6 attempts at an exam but will have to wait 2 weeks in between exam attempts. 531 EMT Intermediates still have to transition to AEMT.
- AEMT exam preparation and Pearson VUE: getting ready for an extremely busy fall season because this is when we anticipate seeing the first set of EMT Intermediate “sunset” dates. Next year is the first year that intermediates turn into EMT’s if they do not do their transition. This spring, we saw our first round of EMT Basics who were set to sunset and turn into Emergency Medical Responders. We spent time contacting people to

communicate the importance of the situation. As a result, we had 25 EMT Basics who lapsed in both their registry and their NH licenses. This is consistent with the traditional rate of attrition.

NCCP – continues to move forward. Dr. Wallus represented the MCB in the stakeholders’ group. The State portion of the local continued competency requirements was developed with accompanying lesson plans which are being integrated into the National Registry documents. These will be uploaded onto the [NCCP page on the Bureau of EMS website](#).

The assessment guide results are now in and available to those who log in.

It was mentioned that if there are less than 10 self-assessment guides that have been completed, the service cannot get the results. Jon Bouffard explained that regional results will be given if the regions have been defined. He will check on this with the National Registry.

By mid-June, those who expire in 2016 will be able to use the NCCP for the remainder of this cycle. Once you opt in, you are committed.

Item 1. Investigation Subcommittee / Saf-C 5903.10 update – G. Turpin

Bureau Chief Mercuri stated that after a discussion with the committee, a couple of changes were made to the rules:

(k)(5) added – “Description of the facts surrounding the decision containing sufficient detail to provide the respondent with the basis for the decision.”

(n)(5) added – “as specified in (k)(5)

Bureau Chief Mercuri explained that the reason for the change was to add more information and transparency to the information in the finding letter. David Strang requested we change in (k)(5) – “Description of” to “Describes” and that we check to make sure that in (q) “license action” was replaced with “unit or provider license revocation, suspension, or limitation.”

Motion made by Stacy Meier; seconded by Susanna Ayers – to accept the rules as amended; passed unanimously.

Item 2. Law Enforcement Provider “Narcans Only” Rules – G. Turpin

JLCAR asked that the wording on the rules be changed from “emergency rules” to “regular rules”.

Motion made by Richard O’Brien; seconded by Frank Hubbell – to accept the rules as regular rules; passed unanimously.

In the future, it should be made clear to the board whether or not rules being discussed are considered to be emergency rules or regular rules. (Emergency rules go into effect immediately as opposed to going through the JLCAR process.)

Item 4. Data Advisory Committee update – R. Cooper

The EMS Compass program was explained in IV – Report of the Bureau Chief of EMS.

Item 5. Board Membership – G. Turpin

A third public member is needed. **Dr. Strang will approach Don Johnson.**

VI. New Business

Best Practice document wording change: Richard O'Brien pointed out that action needs to be taken at this meeting on a section of the current Best Practices documents regarding securing patients; the wording needs to be changed in the third section regarding securing children for transport to reference EMS Protocol 8.12 so that there is no conflict or duplication; there should be consistency between the two documents. The protocol should be the anchor for this because it is reviewed every two years.

Motion made by Richard O'Brien; seconded by Michael Cloutier – that Section 3 (securing children) of the Best Practice document about securing patients, be changed to reference EMS Protocol 8.12 (pediatric transportation protocol); passed unanimously.

Term limits: David Strang requested clarification of board term limits in light of the March, 2015 meeting with Attorney Brian Buonamano. Term limits start with individuals filling seats rather than organizations that hold the seats; if someone replaces a board member, the new person's term is the one that takes precedence, contrary to what has been done in the past. Some letters from the Governor's Office will have to be changed as a result. This will present some challenges from a management perspective; not knowing exactly when each person's term began will make it difficult to know when terms should expire. This is especially critical to those who are in their ninth year, and so their terms will be examined first as we go through this change. Kathy Higgins-Doolan will submit letters to Attorney Buonamano for review 6 months prior to the end of board member terms; no more than 4 at a time.

EMS licensing statistics:

As requested at the 5/21/2015 Coordinating Board Meeting, the following are lists of licensed Providers, at all levels, currently (May 2015 – only 4 weeks after licensing deadline) in our system as compared to the January 2015 numbers.

The difference reflects many variables:

- 1) Individuals that did not re-license,
- 2) Individuals that moved to another level of provider,
- 3) Individuals that did not re-license in NH but moved to an EMS system out-of-state,
- 4) Providers that newly licensed in NH,
- 5) Providers who licensed only for the purposes of reciprocity to another state through an educational agency, and possibly
- 6) Providers who are currently in process of moving up but not practicing/unlicensed.

At this time our system does not distinguish between these variables. When a comparison is made from Annual Reports year-to-year on the number of EMS providers the Bureau had licensed at the time of the report, we find that the average total is approximately 5000. This total (May 2015) is currently 4927.

	<u>Jan 2015</u>	<u>May 2015</u>
EMR/FR	233	242
EMT-B/EMT	2692	2432
EMT-I/AEMT	1342	1290
EMT-P/Paramedic	1025	963

NOTE: There is also a segment of our EMS community that do not re-license until they come back to work for the summer (camps/water parks/snowbirds) and there will be an influx of license applications coming in over the next few weeks for providers in this category, at all levels. Additionally providers who have aged-out/retired from the system also cause a drop in numbers, changes in the retirement system in the past few years may also be reflected in these numbers. At this time we cannot track these numbers, but realize this should be a goal in the future.

Total Providers as reported in Annual Reports:

<u>FY 11 – 12</u>	<u>FY 12-13</u>	<u>FY 13-14</u>	<u>Currently</u>
4804	5332	5326	4927

Licensed Instructors:

IC/Provisional ICs	149	154
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Unit information:

Additionally, an average of 300 EMS Units and 500 ambulances are licensed annually. This number has been consistent for many years.

Strategic planning:

Chair Turpin stated that the goal is to have everyone get together for a day to discuss the vision for the next 5 years. Topics to be discussed include the following:

- Reciprocity
- Hospice/palliative care
- Line of duty death benefits

Because a trauma system-wide evaluation is coming up next spring and money has been requested to have NHTSA to come back in (last evaluation was 20 years ago), the CB agreed to wait to until these reports come in to work on strategic planning.

VII. Good of the order / Items of Interest

A question was asked as to whether or not there has been a CB discussion about RSA language dealing with where EMS providers can practice and on whom.

Nick Mercuri stated that DHHS has actually filed a 4-year exemption for Mobile Integrated Healthcare programs in the State of New Hampshire. The protocol has been updated and we have an application packet. There already is some drafted legislation regarding where EMS providers can work, but it did not get filed in this legislative session. This will be brought before the CB in the fall, and sponsors will be needed.

Dr. Strang inquired about skipping the July meeting. After canvassing the CB, it was decided that the meeting will be held as scheduled.

Director Pendergast thanked everyone for what they do. She also spoke about the emphasis on behavioral health during EMS week and pointed out that between October 1, 2014 and May 1, 2015, there were 101 reported first responder suicides. The Director reminded all of us to be vigilant in terms of watching out for signs and symptoms in our colleagues and to take the time to take care of ourselves.

VIII. Adjournment

Motion made by Stacy Meier; seconded by Jason Grey – to adjourn the meeting at 2:20PM; passed unanimously.

FYI: Below is a copy of Chapter 91-A, Section 91-A:2, III regarding committee/board members who call in to meetings: (Important points are highlighted in yellow.)

III. A public body may, but is not required to, allow one or more members of the body to participate in a meeting by electronic or other means of communication for the benefit of the public and the governing body, subject to the provisions of this paragraph.

(a) A member of the public body may participate in a meeting other than by attendance in person at the location of the meeting only when such attendance is not reasonably practical. Any reason that such attendance is not reasonably practical shall be stated in the minutes of the meeting.

(b) Except in an emergency, a quorum of the public body shall be physically present at the location specified in the meeting notice as the location of the meeting. For purposes of this subparagraph, an "emergency" means that immediate action is imperative and the physical presence of a quorum is not reasonably practical within the period of time requiring action. The determination that an emergency exists shall be made by the chairman or presiding officer of the public body, and the facts upon which that determination is based shall be included in the minutes of the meeting.

(c) Each part of a meeting required to be open to the public shall be audible or otherwise discernable to the public at the location specified in the meeting notice as the location of the meeting. Each member participating electronically or otherwise must be able to simultaneously hear each other and speak to each other during the meeting, and shall be audible or otherwise discernable to the public in attendance at the meeting's location. Any member participating in such fashion shall identify the persons present in the location from which the member is participating. No meeting shall be conducted by electronic mail or any other form of communication that does not permit the public to hear, read, or otherwise discern meeting discussion contemporaneously at the meeting location specified in the meeting notice.

(d) Any meeting held pursuant to the terms of this paragraph shall comply with all of the requirements of this chapter relating to public meetings, and shall not circumvent the spirit and purpose of this chapter as expressed in RSA 91-A:1.

(e) A member participating in a meeting by the means described in this paragraph is deemed to be present at the meeting for purposes of voting. All votes taken during such a meeting shall be by roll call vote.

Even if voting members call in, a physical quorum must still be present at the meetings.

Next meeting: Thursday, July 16, 2015
Richard M. Flynn Fire Academy,
Dormitory Building / Classrooms 5 & 6
Future meetings: September 17, and November 19, 2015

Respectfully submitted,
Grant Turpin, Chair

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