

NH EMS Medical Control Board

MEETING MINUTES (Approved)

July 16, 2020

9:00 AM

Richard M. Flynn Fire Academy

Via Teleconferencing

98 Smokey Bear Blvd., Concord, NH 03301

Quorum: 7 members required (currently 12 positions on the MCB)

Members Present via Telephone:

Robert Rix (Chair), Michelle Nathan (Vice Chair), Marc Grossman, Frank Hubbell, Andrew Seefeld, James Suozzi, Brian Sweeney, Thomas Trimarco and Harry Wallus. **(9)**

Members Absent:

John Freese, Patrick Lee and Joshua Morrison **(3)**

NH FST&EMS Staff:

Bureau Chief – EMS Justin Romanello, Chief Nick Mercuri, EMS Medical Director - Joey Scollan and Hayley O’Brien (Minutes) **(4)**

I. Welcome/ Membership

Meeting called to order at 9:04 AM by Chair Rix

Chair Rix read the “Checklist to Ensure Meetings are Compliant with the Right-To-Know Law during the State of Emergency” and then Hayley did a rollcall attendance for board members.

There are no expirations until November 2020.

II. Approval of the minutes

Motion Made (Grossman/Nathan) - to approve the May 21, 2020 minutes as written; passed unanimously via rollcall vote.

Grossman	Yes
Hubbell	Yes
Nathan	Yes
Rix	Yes
Seefeld	Yes
Suozzi	Yes
Sweeney	Yes
Trimarco	Yes
Wallus	Yes

III. Division / Committee Reports

1) Bureau of EMS and Division Updates –Bureau Chief of EMS Justin Romanello & Chief Nick Mercuri

- a. Staff in call centers have been pulled back to the Division. Although most staff members are back to their original duties, the Division is still involved with contact tracing. Also involved in making phone calls to those who are in Tier 1, 2, or 3 housing.
- b. Vacant/open positions are still on hold at this time.
- c. No new emergency protocols or rules.

- d. 10 business days left in the relicensing period. This expires the 30th of July. 711 providers still need to relicense still. 300 of those are not affiliated, therefore they will not relicense unless they become affiliated.
- e. As of July 13th practical exam programs will resume. Mouth to mask station has been removed for EMR's and the cardiac arrest station has been removed for EMT's. Mannequin use is encouraged. Combining skill stations is now allowed. On a case by case basis with prior approval, smaller exam session will be allowed.
- f. Once the licensing period is complete, the Bureau will issue a Protocol Rollout. Last minute edits are being conducted. Hopefully being pushed out by the end of August, early September.
- g. User Management System is moving along. At this time all vehicles and services have been entered and the Division is going to start incorporating the inspection process. Personnel is being added, but due to the Records Management System Coordinator position being vacant, things are moving slower. A waiver is at the Governor's Office to hopefully get this critical position filled.
- h. The individuals that were enrolled in the EMR program up north were approximately half way through the program when COVID hit. The Bureau is facing issues with instructor availability and how to effectively manage a larger class, but it is a work in progress to get this moving.
- i. The Simulation Program is scheduled to get back up and running. The Bureau has acquired 2 new pediatric mannequins to add to the 5 mannequins we currently have.

2) Legislative Report – Chief Nick Mercuri

- a. SB540 that was filed to repeal the inner state compact was incorporated into HB1234 and will be moving forward. If the Governor signs this bill, this will repeal the EMS inner state compact. HB685 regarding ambulance billing has changed to insurance covering emergency abortions. HB1122 regarding the addition of first responder suicide being added as a Line of Duty Death does not look like it is going to move forward. SB670 regarding ambulance transports where they can and cannot transport went from a restriction to a study committee. Unfortunately, when a bill gets incorporated into another bill, there is no definitive tracking mechanism.

3) Coordinating Board Update:

- a. F. Hubbell stated the last meeting was May 21, 2020 with normal reports out.
- b. A motion was made that a sub-committee was formed within the Coordinating Board to review and update the vehicle equipment supply list.
- c. Dr. Hubbell stated his term on the Coordinating Board has ended, but he is currently in hold over status until another member expresses interest in this position.
- d. Here is the link to the minutes of the Coordinating Board:
<https://www.nh.gov/safety/divisions/fstems/ems/boards/medicalcontrol/mminutes.html>

4) Trauma Medical Review Committee Update:

- a. T. Trimarco stated the last TMRC meeting on June 17, 2020 with normal reports out.
- b. Sub groups did not have a chance to meet prior to this meeting.
- c. The American College of Surgeons has extended hospital designations from a trauma side for 1 year. The State has also extended this for Level 3 and 4's.
- d. Here is the link to the minutes for TMRC meetings:
https://www.nh.gov/safety/divisions/fstems/ems/boards/traumamedicalreview/trauma_minutes.html

IV. Protocols

- a. The Advanced Sepsis Packet had a few minor changes and the Bureau would like to examine them closely to determine any substantial changes or not. Nobody in the State is using this. This was tabled and to be discussed at the next MCB meeting.

V. Old Business

- a. Vote on a Member appointed to the CB – No members expressed interest in filling this spot. This will remain on the agenda until someone expresses interest.

- b. BioSpatial – Unfortunately, the Division is unable to have a contract with them based on current legislation, data sharing and use agreement. This would require a legislation change if the Board was in favor of this. The filing period with the House is end of September. The end of the filing period with the Senate is the middle of November.

BioSpatial recap – A surveillance tool used to pull reports, track and compare data to other states pertaining to medical and trauma data. Graphing and mapping tools are available. There is no fee to the states they are using BioSpatial. Government and private entities contracts is how they make their money. ImageTrend offers this, but it is a more robust system and costs fifty thousand dollars a year.

Currently, 24 states are using BioSpatial, including our neighboring states, Maine, Rhode Island and Vermont are almost fully signed with BioSpatial. No argument was seen against this.

Motion Made (Suozzi/Sweeney) – to provide a letter from the Board formally supporting the legislation to allow the use of BioSpatial in the State of New Hampshire; passed unanimously.

Grossman	Yes
Hubbell	Yes
Lee	Yes
Rix	Yes
Seefeld	Yes
Suozzi	Yes
Sweeney	Yes
Trimarco	Yes
Wallus	Yes

- c. Maximum Quantities of Controlled Substances - No new information on this due to the pandemic. This will be removed from the agenda until further notice.

VI. New Business

- a. COVID-19 – Chief Romanello

- 1. Emergency Rules → Rules
Nothing further to report.

- 2. Emergency Protocols → Protocols

A question aroused about the use of Epinephrine. A member from the public stated the protocol states it is just for EMS providers and the early steroid administration has been shown as helpful in COVID patients. Chief Romanello mentioned that some minor adjustments will be made to the emergency protocols, but where the protocols stand at this point, a recommendation discussion would be more effective.

- 3. COVID-19 General Discussion

- Dr. Suozzi mentioned the noticeable relaxation of PPE being worn for EMS transports. Dr. Suozzi was curious if the State or Bureau could release information on the mandating wearing simple PPE. Such as, eye protection and masks for EMS transports. Many other members have noticed this as well. Chief Romanello mentioned they will be pushing out guidance on highly encouraging providers to follow CDC guidelines and highlighting the importance of PPE usage. Chief Romanello reminded everyone that testing is no longer handled by the Department of Public Health labs, therefore there is a delay in getting test results back. This is out of the Division’s control. Chief Romanello mentioned that the wording in the Protocols is as close to “mandating” as the Division can get, but mentioned revisiting this wording to ensure simple PPE usage is covered.

Dr. Trimarco asked if the MCB could add mandatory mask wearing in an emergency protocol. Chief Romanello will look into this, due to the MCB being a State Board, but he will get back to the Board with more information. Chief Romanello highlighted the importance of being able to provide the recommended resources as well.

- A brief discussion ensued about PPE with multiple comments from the public. The comments brought up agreed with complacency being seen with PPE usage and the confusing, mixed messages being sent to everybody. A request for clarification and mandating simple PPE was made.

Motion Made (Suozzi/Trimarco) – *the Medical Control Board recommends to the Commissioner and State Medical Director to mandate universal PPE consistent of gloves, simple face masks and simple eye protection for all patient contact during the declared public safety and health incident; passed unanimously.*

Grossman	Yes
Hubbell	Yes
Lee	Yes
Nathan	Yes
Rix	Yes
Seefeld	Yes
Suozzi	Yes
Sweeney	Yes
Trimarco	Yes
Wallus	Yes

A comment about adding “at minimum” to the motion above was mentioned.

Motion amended by (Suozzi/Trimarco)

Motion Made (Suozzi/Trimarco) – *the Medical Control Board recommends to the Commissioner and State Medical Director to mandate universal PPE consistent of gloves, simple face masks and simple eye protection at minimum for all patient contact during the declared public safety and health incident; passed unanimously.*

Grossman	Yes
Hubbell	Yes
Lee	Yes
Nathan	Yes
Rix	Yes
Seefeld	Yes
Suozzi	Yes
Sweeney	Yes
Trimarco	Yes
Wallus	Yes

VII. Topics Ad Libitum

- Chair Rix opened the discussion up to the public for any comments/questions.

- b. Dr. Nathan asked the Board if they have experienced any issues regarding the use of Ketamine. Shown in some cases here and there. Dr. Suozzi commented they have not seen it in their area, but they are paying very close attention to this to remain vigilant.
- c. Dr. Wallus asked the Board if anybody else has had a patient misusing the 911 system. Regarding transporting the same patient 2-3 times a day. He was looking to see if others had a solution for this issue. Chief Romanello mentioned having no experience on a pathway with this situation since he has been a part of the Bureau, but he will look into this and get back to Dr. Wallus after this meeting.

VIII. Adjournment

Motion Made (Sweeney/Trimarco) - to adjourn the meeting at 10:56 AM; passed unanimously.

Next Meeting: September 17, 2020