

Draft Summary Minutes

Emergency Medical Services Regulatory Board

Executive Committee Meeting

Wednesday, January 9, 2013, 10:00 a.m.

2829 University Avenue SE

Minneapolis, Minnesota

<u>Members Present</u>	<u>Guests</u>	<u>Staff Present</u>
Kelly Spratt, Chair Paula Fink-Kocken, M.D. Pat Lee Gary Pearson	Buck McAlpin Bill Snoko Rick Wagner	Pamela Biladeau Melody Nagy Debra Teske

I. Call to Order

Mr. Spratt called the meeting to order at 10:11 a.m.

II. Approval of Agenda

Mr. Pearson moved approval of the agenda. Dr. Fink Kocken seconded. Motion carried.

III. Approval of Minutes

Mr. Pearson moved approval of the October 28, 2011 minutes. Dr. Fink Kocken seconded. Motion carried.

IV. Chair's Remarks

Strategic Planning Overview and Next Steps

Mr. Spratt said that the Board is going through the strategic planning process. We want to decide what we are trying to accomplish as a Board. How do we move forward in collaboration with our partners in the ambulance industry? What is the purpose of the Board? We have had several sessions to develop the work plan. The strategic planning subcommittee met yesterday. Ms. Biladeau said the committee will need to meet again before the 31st.

Election of Officers – January 31

Mr. Spratt said that this has been delayed because of strategic planning. The officers will be elected until 2015. The vice chair position is open. All the officers will be up for re-election.

Ms. Biladeau said that the Senator and Representative will need to be reappointed and we will send that request in February. Mr. Spratt asked how that happens. Mr. McAlpin said that a great person would be Representative Dan Schoen who is a police/paramedic from Cottage Grove. We will work with Ms. Biladeau to make a recommendation.

Policy – Requests for Support

Mr. Spratt said that the ESMRB has been receiving requests to post employment opportunities. It could be an issue for a state agency to promote jobs. Mr. Schaefer said that this could be a slippery slope and would need to be approved by the Board. The Board would need to consider the related issues. Many state agencies have developed a policy not to post employment notices. This would need to be a policy decision at a Board meeting.

Ms. Biladeau said that one of the areas we have struggled with is that we are a two tiered agency. All roads lead back to regulation. Our agency is different than other Boards. Our two tiers include regulation and technical assistance due to a large number of volunteer services. Input is essential in how we work together. Technical support would be another division. A large role is managing expectations. We are experiencing this in the discussion regarding the education standards. The expectation is that we will give them what they need for teaching to the new standards, however, our role is regulation. We work with education partners, such as, the Minnesota EMS Association and have them listed on our website for peer to peer assistance.

Mr. Spratt said that we want to stay pure. We do not want to go into the weeds. The lines can get blurred quickly. Mr. Spratt said he is excited to have industry and legislative representation at this meeting to have this discussion on what lies ahead of us. We want to talk about the role of the Board.

Mr. McAlpin said that if we look at the history from 1995/1996 and how the Board was set up. We are at fault in how it was set up also. I like how the Board is having the conversation in what we need to do in the future. We want the Board to stay in place. We want to help Ms. Biladeau and staff in their work.

Mr. Snoke said that as we look strategically at the organization. I think back to the 1970 – 1980's and the maturity of the industry has grown. The approach to regulation has evolved. Health care standards are changing. How do we keep regulation and health care and public safety in balance?

Mr. Spratt said that is the focus of the strategic planning. The EMSRB staff FTE decreased 50% in the past years. We need to focus on the essential work. What are we involved in that we should not be.

**V. 2013 Legislative Session
Process**

Mr. Spratt asked for an overview for the legislative session.

Mr. McAlpin said that the Minnesota Ambulance Association is moving four proposals forward. There was an error in the bill regarding rate reductions and we want to provide money for providers. We know that longevity was reduced and the EMSRB budget was reduced. We are proposing to use money for higher education for veterans. We are proposing a bill to increase revenue for ambulances to give them money for equipment.

We are working with medical directors to develop a 12 hour Community Paramedic refresher. This is at the reviser's office. We would support a housekeeping bill for the EMSRB.

Mr. Snoke said we want to structure the CP refresher to allow the ambulance medical director to approve the continuing education hours for the CP. We wanted flexibility. This would hopefully make it easy to regulate.

Mr. Snoke said that we anticipate a PSA bill. We do not see language yet. I am monitoring the League of Minnesota Cities meetings.

Ms. Biladeau said she wants to demonstrate the steps involved to provide reports to another state agency. She showed the committee members a three ring binder that includes the

information for the research for one report. The education standards documentation is two, large three-ring notebooks and growing. We want CP renewal to be simple. We would have a medical director sign off on their renewal. The education standards issue is more complex. We wanted to look at what changed in the national standards and align processes.

Ms. Biladeau said that she included a document on the 50% loss of staff. There is a handout of functional responsibilities per statute and prioritize workloads. We are reviewing the key positions that have been lost. We are also reviewing the inspection processes and reconfirming delegated authority for staff. This is the work that we are continuing in between the other deadlines. We are looking at the criteria for public protection. We look at internal processes with the CRP.

Ms. Biladeau said we are looking at copyright issues for the CP education standard. The Board approved this curriculum. Ms. Biladeau asked Mr. Schaefer to report on this. We are discussing this issue with Mr. Wingrove and have a proposal drafted for further discussion.

Mr. Schaefer said that there is a proposal for an agreement that we have concerns about. We do not determine what is copyrighted. We would have to release it if it is challenged. We would fight this action. The company has concerns about holding this copyright. They have agreed that the Board can see it. It needs to be protected as copyright by the company. It is not a state copyright. We will try to protect it but if challenged in court it could be released.

Mr. McAlpin said that we discussed this at a committee meeting and discussed publishing this document. There is nothing top secret in this curriculum. This is not being handled well. This is a problem. Mr. McAlpin said this needs to be published. We do not need a trade association holding this document hostage. Mr. McAlpin said that he would discuss this with Mr. Wingrove.

Mr. Snoke said that "Community Paramedic" (the name) is not an enforceable copyright. I asked the question of several attorneys. Mr. Snoke asked why it was copyrighted. Mr. McAlpin said that the committee decided to copyright the document. Mr. Snoke said that another company can develop their own curriculum. He referred to Minnesota Statute 144E.28.

Ms. Biladeau said that we are looking at these issues and I am concerned about the level of the ability we have in our agency in reviewing Community Paramedic programs. This is a new maturing and complex skill level. I want to request the Board convene a subcommittee to review the on-site evaluation criteria. Inver Hills is asking for an onsite visit for their education program. They intend to have classes in February. Approval of programs is not just a formality and it will be important that education programs let their students know when they are not approved-- staff does not give out cards to students who have taken courses through unapproved programs. We want to also ask if there should be a moratorium until we have an education transition plan.

Mr. McAlpin said that Ms. Biladeau and I discussed this. I saw an article regarding Ridgeview having paramedics do home visits. We are exempt from scope of practice. He said this subcommittee needs to happen quickly. This is a primary care health care delivery model. We are having great success. We can change the law to reflect this. This committee should include primary care doctors and educators. He suggested Dr. Bixby as a member of the subcommittee.

Mr. Snoke said this is a challenge for credentialing. We do not want a moratorium on a cutting edge program. He said that the language in the statute will allow approval by the Board of the curriculum. Mr. Spratt said that the criteria need to be approved by the Board.

Mr. Snoke said that CP is a broad term. The implementation has changed the role of the CP. It is a broad role for out of hospital care. (primary care, hospice, long term care)

Mr. Spratt said that the subcommittee will need to determine the curriculum. Mr. McAlpin said that we looked at the hours involved. We added hours for wound care, etc. HealthEast is looking at a meeting to discuss this. We can develop some standards for the EMSRB.

Ms. Biladeau said we need to have standardized criteria for verifying an education program is meeting minimum education requirements for public protection. We have the assurance of the medical directors' license covering their actions.

Mr. Snoke said we do not want to reinvent the wheel. The Department of Education must have an approval process for education programs. He asked if there are existing templates. Can we duplicate what is out there?

Ms. Biladeau said that we are using the paramedic on-site evaluation as our template for the CP which requires a program be accredited.

Mr. Spratt said that this boils down to the discussion of what should we be chasing. We need to look at the priorities and the competing issues of time management. Is this the top priority for staff besides keeping ambulances on the road?

Mr. Snoke said that this is the hot topic. Is it the most important issue that needs to be discussed? The Board can point to another accrediting group for the standard. I do not want to discount the staff. Does the Board want to focus on ambulance inspections? Could we point to someone else's accreditation process? This would not be as cumbersome for staff. We need to concentrate on statute enforcement.

Ms. Biladeau said that it will be important to be able to defend the evaluation criteria we use based on public protection needs. Mr. Spratt said we have a request on the table for a course approval.

Mr. McAlpin said that there are three people from Minnesota in the class and 30 from out of state. We are also conducting a class that is funded by a grant that will include St. Paul fire personnel. Other states are not at this same level. We want to have physicians included in this review.

Mr. Spratt asked what we tell Inver Hills. We need a recommendation for the Board meeting for the subcommittee membership. How many participants and from where?

Mr. Snoke said that at Allina we have resources in the company that focus on education. We can reach out to these people and pull this together. We have expertise within our own company. Look at the education folks and add the physicians. I feel that this is too cumbersome. This should not take too much time to develop.

Mr. Pearson asked who approved Hennepin. Ms. Biladeau said that the Board did and it was discussed at a meeting and approved.

Mr. Snoke said that the accreditation in the 70's was less cumbersome.

Dr. Fink Kocken said that a physician's CME are incredibly complex. There are a lot of hoops to jump through. I don't know that EMS has that many. If we want to set this up we would have to pay people to do these site visits. This is a business. Is that what EMSRB should be. Do we have to do this or do we look at someone else to handle this.

Mr. McAlpin said this is a good core curriculum. We do not want to micro manage what is included. In the future we could look at this again. We want to have a discussion with the Board on the payment process. How do we fit in the new payment system?

Mr. Snoke said that the Board can farm this out.

Mr. Spratt said he is hearing that it is the consensus of the committee to hold on Inver Hills application. The Board would develop a small committee to discuss the issue and develop the floor but not interfere with the medical directors' role. Mr. Snoke said he would caution the hold for Inver Hills. We need to train our local people.

Mr. McAlpin said that there can be a window for discussion of 45 to 60 days.

Mr. Snoke agreed that we should discourage other applications until this is approved.

Ms. Biladeau said that these companies need to work with the EMSRB. This is not just a formality.

Mr. Spratt said that Inver Hills would be grandfathered and the subcommittee discussion would need to take place.

Ms. Biladeau said we have not had time for an onsite visit. We have not seen their documentation. Ms. Biladeau said we are behind by approximately 300 hours per week with our current workload. Mr. Pearson said that we should approve them.

Mr. Lee said that they notified the EMSRB at Christmas and already has a class scheduled for February.

Mr. Snoke said that this is uncharted waters for everyone. Mr. Snoke said we need a line in the sand. Mr. Snoke said he has not heard of another program developing criteria.

Mr. Spratt said he feels this would be a great program. He said that we need to verify this with documentation. Dr. Fink Kocken said we need accountability of their training. Mr. Snoke asked who else does the accreditation?

Mr. Pearson said that the committee can discuss the accreditation process. We need an answer for the outstanding question.

Mr. McAlpin said that for the trauma program they are inspected by their peers. Mr. McAlpin said that this is not EMT/paramedic based care it is primary care. Mr. Pearson said that the role in the metro and outstate would be different. Mr. Snoke said that the gap in care may be different in each company.

Mr. Snoke said that we saw this as an ambulance extension. It will grow into other things out of ambulance care.

Mr. Spratt said he need to leave to go to another meeting but appreciates the involvement of others in this discussion. The rest of the meeting was chaired by Mr. Pearson.

Legislation

Ms. Biladeau provided handouts and said that these are the housekeeping areas that we have developed for legislation for 2013. We have talked about CP refreshers and the 12 hour requirement. She asked for a copy of the legislation.

Ms. Biladeau said that we need language for radio rule repeal. She provided a document for review.

Ms. Biladeau said that the AMET is a question. The way it has worked in the past for the EMT 85 is that they had the option of dropping down or going to AEMT. The difference in hours is about 100 – 150 hours. We would recommend accreditation for this change. Mr. McAlpin said we had this discussion.

Mr. Lee said that since the central region dropped two counties. Does that need to be changed? Ms. Biladeau said that one thing was not clarified and I am seeking attorney generals' clarification. The regions for the grants are only defined in statutes as "eight regions". We do not need to make a change. Mr. Pearson said that this was discussed at the Board meeting. Mr. Schaefer said we need to look at the joint powers agreement and that is where the counties are identified. Mr. Lee said that other regions are not joint powers. Ms. Biladeau said we will change the map. Mr. Pearson said that the Board had this discussion.

Ms. Biladeau said that item 3 and 3A have to do with education programs. There is wording for grandfathering of paramedics. These are not accredited programs. They have never taught a course and do not align with new education standards.

Mr. Snoke asked what the consequences are if this does not go through. Ms. Biladeau said this would cause misalignment with the national testing requirements. Ms. Teske said that the National Registry is making this change effective 2013. The National Registry will not allow testing of paramedics in 2013 from a non-accredited program.

Mr. Pearson asked if we need a motion. Ms. Biladeau asked if they would like to group their motions together.

Ms. Biladeau said item four is a minor detail on education standards. This is a technical change to include 2 – 10 not 2 – 9.

Ms. Biladeau referred to item five regarding First Responders. She referred to statute book and said that on page 17 and 23 there is language regarding this. Minnesota Statute 144E.285 covers what we use for an application for an education program. The new standards require a medical director for an emergency responder program. Ms. Biladeau said she drafted language that would align with the standards and help clarify.

Ms. Biladeau said that we also have some things to discuss for future consideration. Ms. Biladeau said that number six is for your awareness of the new statute regarding unethical practices.

Mr. Schaefer said that when he reviewed this it prohibits business interests making referrals for care. This is prohibited for certified individuals.

Mr. Snoke said that is a challenge we face is when an ambulance crew is asked to recommend a hospital. Is this a referral? If I am on an ambulance crew what are my limits. Mr. Schaefer said that the criteria of patient needs determine where the patient should be delivered. Mr. Schaefer said that he would look at this a personal opinion is not a referral. Mr. McAlpin said that there is an exemption in the language for ambulance crews. Ms. Biladeau said that the Board should not have an issue since ambulance crews are exempt.

Mr. McAlpin said that no fault insurance will be proposing legislation.

Ms. Biladeau said that number seven is a recommendation that needs discussion regarding adding AEMT. Mr. McAlpin said that he liked adding the electronic filing. We need clarification because this is a grey area. This allows flexibility.

Mr. Schaefer said that the recommendation would be to develop a format. Ms. Biladeau said that the inspectors go onsite and look at individual records. They would allow reviewing documents electronically.

Mr. McAlpin said that this does not limit to electronic. Mr. Schaefer said that it would be helpful to have information better prepared. Ms. Biladeau said we have a sample document provided to ambulance services. When there is a new ambulance director sometimes information is not shared. The EMSRB tries to work with the customers to achieve balance.

Mr. Pearson said that he sees this as summary information. Mr. Snoke said we want more efficiency. Mr. Wagner said that we have to discuss what is expected and how it is interpreted. Some would think that electronic files are mandated. We need to include options "Or".

Discussion for Future Legislation

Ms. Biladeau said that we have had questions about critical care licensure.

KKK update is the standard in rule for vehicles. That standard is going away. The new standards are not in place until 2015.

We are looking at federal air medical care laws.

Lee moved that these bills be referred to the board for approval, with the exception of MS Statute 144E.285, subd. 2, (d), Sections 1-5.

Ms. Biladeau asked for language for the executive director to work on moving the bills forward. Kocken seconded. Motion carried.

Sunset Commission Report

Ms. Biladeau said that she wanted to provide this as an awareness piece. The other boards were required to report. They set standards for us and we will be asked to review it when we go through the sunset commission. They were asked about background checks and fingerprinting. It will not be available by BCA until 2015. The other boards will set the standard and we will need to consider these issues. This is for information and future action. The EMSRB Sunset Report is due September 1. This is an aggressive timeline.

Ms. Biladeau commented that it would be helpful to discuss proposed legislation so identify any unintended consequences and the ability to implement.

Ms. Biladeau said that out of that work we developed a chart and the loss of staff resulting in a back log of 384 hours per week. Public safety issues take precedence and day-to-day work goes into a cue. The Board approved in October 2012 requesting additional staff this legislative session.

We will lose the research person in April when the grant ends. The workload for grants has increased when the state auditor required receipts prior to reimbursement. We looked at another chart of what is getting done more slowly. We are still paying unemployment.

Office Administrator Position

We hired another position. I am excited to announce this position. I worked with the Executive committee when discussing the budget. We were able to hire the position to assist with grants (awards, longevity – some of the work) and preparing for sunset commission. Mr. Raines will fill the position. She described his qualifications and his background. Debby is retiring at the end of the year. She has absorbed 3 or 4 positions.

New Business

Gary asked if there was any new business.

Pat said that he had told Chair Spratt that he was going to bring forward some concerns.

Mr. Lee said that he has been appointed by the governor and he is on the finance committee and executive committee. This is the first I am hearing about this new position. This is all news to me. We lost two positions in 2012. We had these two positions in the budget. Why were these positions not filled but the funding was there. The budget was approved without the finance committee seeing it. Is this position going to help the regional programs? Am I going to be paid? We are three months behind in payments. I have concerns as an executive board member, appointed by the governor and not knowing what is going on at the EMSRB office. I feel lost. We have not had a finance or executive committee meeting. The last executive committee meeting was in 2011. I have not even gotten an email from Ms. Biladeau in a year.

Ms. Biladeau looked towards Gary. Pat told Ms. Biladeau not to look at Gary, look at me.

Ms. Biladeau said that two finance meetings were cancelled. There were 40+ meetings the past year. Melody agreed with Pam that no one was available for two months, missing the state October Biennial Budget deadline. For the finance meeting she had been trying to schedule members calendars were booked out approximately 2 months. Pam said that the work on the budget couldn't wait two months, due to the deadlines MMB had, as well as information coming at the last minute. In lieu of missing the dates and continuing to try to schedule a Finance Committee meeting, Ms. Biladeau said closed session were held with the executive committee and Board approving the Biennial Budget. I have been in touch with Mr. Pearson and Mr. Spratt and provided information as I receive it. Again, when there are 40 meetings a year to prepare for, the preparation time is extremely heavy. I am working 7 days a week 16 hours a day and there is only so much time. I agree with you Pat, but do not have control over the MMB deadlines and the SWIFT system. I have reported on the budget and staffing at each Board meeting. Ms. Vangness reported at a finance committee meeting that we do not have money to hire. I am continuing to have this discussion with her.

Mr. Pearson confirmed that Ms. Biladeau has talked to him about these issues and that he has had discussion with her as Finance Committee Chair.

Mr. Pearson said that we need to have discussions with finance and executive committees. There are a lot of circumstances and a lot of things going on. I think we can provide more support if we have more regularly scheduled meetings in the future. We can have a discussion on resources.

Mr. Lee said that he does not want to micro manage, but feels that there is a lack of communication. Ms. Biladeau said that she discussed the budget with Mr. Spratt and it was approved by the executive and finance committee in lieu of Finance Committee availability.

Mr. McAlpin, Mr. Snoke and Mr. Wagner left the meeting.

Mr. Lee said the communication is gone. Mr. Lee said that I apologize but this is how I feel I do not mean anything personal. Maybe you are communicating but not with me. I am an executive director and I have 20 board members. There is no way that my board would let me go for two years without letting them know what is going on. He said he feels he has no idea what is going on at the EMSRB office. The budget was approved last year and Melinda and Talia should still be working. I am confused on this issue. Why are those two positions not filled? I do not want to see staff burn out. I want the finance committee to see this funding and I am curious. Mr. Lee said we are short staffed at Arrowhead. As a Board member appointed by the governor I feel lost as to what is going on at the ESMRB. I am speaking for myself. I want this to go forward in a positive way and not be negative. We all put in 12/14 hour days. How can the Board help? If we had a finance committee meeting we could see the funding and help. We want to get the employees hired that are budgeted for. Mr. Pearson said that Ms. Biladeau is working on this. We want to go forward in a positive manner.

Ms. Biladeau said that new employee starts January 30.

Mr. Schaefer said that the Board distributes 95% and keeps 5% of grants; and 100% of seat belt funds received by the Board goes to regions.

Ms. Biladeau said that when we are looking at how the money is spent. We are not taking the funding for seat belt. We are supplementing out of operations budget to provide services. These are hard questions. This is a challenge in the future. The workload has increased.

Mr. Pearson questioned the Board role in distribution of seat belt funds in the future. Mr. Lee said that this was a pass through when it first came out. The regions received the money automatically deposited in their accounts. Now, they are told how much is in the seat belt fund for them and they must expend the money before they are reimbursed. Ms. Teske receives a 60 page invoice to review. SWIFT also contributes to this.

Ms. Biladeau said that the positions are filled where funded. The seatbelt program is not a funded position. This needs Board discussion and the regions need funding also. We are taking out of operation salaries normally used for investigations/inspections and using it for the grant position. But the 5% from the support grant and no funding from the relief grant to cover administrative cost are not enough to fund a position for grant management. Current staff has absorbed the grant management work.

Dr. Fink Kocken said that she has two points. Part of Ms. Landucci's salary was paid for by EMSC. Ms. Biladeau said the grant position would actually be two and a half full time positions. We have absorbed these tasks. In between our other work we are conducting these evaluations and reviewing processes to provide information to the Board. We are streamlining processes as much as possible to absorb the backlog and additional responsibilities that have been recently added.

Dr. Fink Kocken said that she is not terribly unhappy. The State is at blame for asking for impossible timelines and giving deadlines that are impossible to meet. They gave short deadlines that the agencies must meet. A deadline for a budget was a frustration. The problem then is that you do not have time for the evaluation. We have a spiral down and the minimum requirements do not get met and the workload suffers. What is amazing to me is that we are looking at accrediting CP programs when we can't do the minimum. We must meet our current minimum requirements and cannot waste time talking about this.

Ms. Biladeau said when the Finance Committee met with Ms. Vangsness she explained that we lost many sources of funding. Ms. Biladeau said she said that she provided information to the Board during her performance review. ImageTrend royalties are over. We have lost homeland security funding. HLB voted to change administrative for HPSP to another agency so we lost that funding. We talked about hiring the grant person and succession planning. What I want to remind everyone of is that Ms. Vangsness said that this is not going to be on a budget sheet when Board approved the Biennial Budget in 2011 prior to my being hired. We need to plan for potential salary increases, a possible 9% increase in health care costs, and potential budget cuts by the legislature. It was explained that we will not be approved to hire until we know where that lands.

We will not know our budget base until the governor's budget is released around January 22, 2013.

Mr. Lee said that if we do not have the money to fill the positions where did it go? Ms. Biladeau said that the new position is partially funded for grants and succession planning and the ED has been given to approval and authority to hire. I felt we were being clear. I wish it were different.

Mr. Lee said we want to support the EMSRB and we see that we have full calendars. We feel bad for you we want to help out I feel we do not know what is going on I want more communications. We do not know if we do not hear about this. If we had meetings staff would not be burned out.

Ms. Biladeau said that prep for each meeting is a phenomenal feat. We looked at scheduling finance committee meetings and could not obtain a quorum.

Mr. Pearson said that this was needed discussion. Now we need to move forward. We have strategic planning to complete. We need to discuss our priorities. CP is nice but our charge is ambulance services and the providers.

Dr. Fink Kocken said we only want to accredit our one agency. We can make this a pending until we have time for the proper review. We can give a one-time blessing and need further discussion. We would need to have charges for accreditation and charge what it would cost to cover staffing. We need to concentrate on ambulances.

Ms. Biladeau said she appreciates Pat's comments. This is emotional because we want to do a good job and provide information. Thank you. I am glad we had this discussion.

Mr. Lee said it would be nice to have things not be stressed.

VI. Public Comment
None

VII. Adjourn
Dr. Fink Kocken moved to adjourn. Mr. Lee seconded. Motion carried. Meeting adjourned 12:38 p.m.