

Draft Summary Minutes

Meeting of the
Emergency Medical Services Regulatory Board
2829 University Ave., SE
Minneapolis, MN 55414
10:00 a.m., January 31, 2013

Members Present

Kelly Spratt, Chair
Lisa Consie
Jennifer Deschaine
Michael Gormley
J.B. Guiton
Kathleen Haney
Michael Jordan
Paula Fink Kocken, M.D.
Pat Lee
Gary Pearson
Jill Ryan Schultz
Mark Schoenbaum
Matt Simpson
Marlys Tanner
Mari Thomas, M.D.

Members Absent

Steve DuChien
Paul Satterlee, M.D.
Rep. Dan Schoen

Guests

Jeremy Berndt
Aaron Burnett, M.D.
Melinda Buss
Tom Fennell
Suzanne Gaines
Chris Hanson
Don Hauge
Nathan Hierlmaier
Kai Hjermstad
Curt Ireland
Marion Larson
Susan Long
Buck McAlpin
Pat McCauly
Kristi Moline
Cheryl Pasquarella
Kjelsey Polzin
Tia Radant
Ron Robinson
Scott Reiten
Gabe Romero
Bill Snoke
Martin Van Buren
Tom Vanderwal
Rick Wagner

Staff

Pam Biladeau, Executive Director
Will Granger
Melody Nagy
Robert Norlen
Jennifer Ojiaku
Rose Olson
Debby Teske

Barb Deming, MAD
Julie Rapacki, MAD
Bryan Huffman, AGO

I. Call to Order

Mr. Spratt called the meeting to order at 10:08 a.m. Mr. Spratt announced that the meeting will be going into closed session to discuss a disciplinary matter.

II. Closed Session

The closed session ended at 10:15 a.m. Mr. Spratt opened the meeting and asked for introductions from members and guests.

III. Approval of Agenda

Mr. Spratt said that he was asked to change the order of the agenda but was hesitant to do so because the agenda is posted with the times listed for each topic. Mr. Spratt asked for a motion to approve the agenda. Ms. Deschaine moved approval of the agenda. Dr. Fink Kocken seconded. Motion carried.

IV. Approval of Minutes

Ms. Biladeau said that she would like to make a correction on page 9 of the November minutes. There was a closed session to discuss the budget that is not in the minutes and that needs to be noted. "Note that the chair requested a closed session." Closed session minutes are confidential.

Mr. Guiton moved approval of the November 15, 2012 minutes. Mr. Gormley seconded. Motion carried.

V. Chair's Remarks

Mr. Spratt said that he wanted to welcome Bryan Huffman, AGO who is filling in for Greg Schaefer, AGO today. He said that Representative Dan Schoen has been appointed to the Board replacing Representative Quam. Mr. Spratt said that confirmation hearings for Board appointments for 2011 & 2012 were held on January 28, 2013. Testimony was provided by Ms. Deschaine and Mr. Simpson. Ms. Deschaine said that the committee had questions about what the EMSRB does.

Strategic Planning Roles and Responsibilities

Mr. Spratt said that several Board members stepped forward to form a smaller group to discuss strategic planning. This will set the foundation for our work. We will have a briefing from Ms. Deming later in the meeting.

Election of Officers

Mr. Spratt said that this has been delayed due to the strategic planning and we will act on this today. He announced that all the officer positions are open for election.

Vice Chair

Mr. Spratt asked for nominations. Mr. Guiton expressed his interest in this position. Mr. Spratt asked if there were any other nominations; hearing none Mr. Guiton is elected by acclamation.

Treasurer

Mr. Spratt said that Mr. Pearson currently holds the position. Mr. Lee nominated Mr. Pearson. Mr. Spratt asked if there were any other nominations; hearing none Mr. Pearson is elected by acclamation.

Secretary

Mr. Spratt said that Mr. Lee currently holds the position. Mr. Pearson nominated Mr. Lee. Mr. Spratt asked if there were any other nominations; hearing none Mr. Lee is elected by acclamation.

At Large

Mr. Spratt said that Dr. Fink Kocken currently holds this position. Mr. Lee nominated Dr. Fink Kocken. Mr. Spratt asked if there were any other nominations; hearing none Dr. Fink Kocken is elected by acclamation.

Mr. Spratt said that the plan is for the Executive Committee and Finance Committee to meet more often on non-board meeting months in a combined meeting.

Approve 2013 Meeting Schedule

Mr. Spratt said that we approved the 2013 meeting schedule in November but there is added complexity of the attorney general's office having staffing conflicts and it is valuable to have their representation. We want to consider changing this meeting schedule.

Ms. Biladeau said that Board members received this by email late yesterday. The handout reflects the new dates in red. The continuity of having an attorney general's representative that is familiar with our schedule is necessary. We have also had issues scheduling this meeting room. We are asking for a change in the Board's IOP to have flexibility of scheduling rather than scheduling in January.

Mr. Spratt said that we have set the meetings to usually begin at 10 a.m. We are looking at two Wednesday meetings for 2013. Mr. Spratt said that he wanted to be cognizant of the people traveling to this meeting.

Mr. Spratt asked for a motion to approve the revised meeting schedule. Mr. Lee moved approval. Ms. Deschaine seconded. Motion carried.

VI. Strategic Planning Subcommittee Report

Mr. Spratt asked Ms. Deming to provide information on the Board's strategic planning. Ms. Deming said we have been working on this since May. We are at a milestone because we are at the end of the planning session and we will begin the implementation portion. We are defining Board and staff work. Ms. Deming referred to the IOP for information including the Carver Model. The Board's focus is on the ends and delegates through the Executive Director the work for staff. The Board focuses on what is to be achieved within the statutory responsibilities.

The Board completed a vision exercise and a plan for the next 3-5 years was developed. In October this was reviewed and further defined. In December the Board decided goals for the next actions. The Board formed a subcommittee to further work on this process. Ms. Deming said that she developed this document for the Board to review. She said that staff develops a plan to implement the vision. The Board evaluates against the plan.

Ms. Deming said she wanted to review the handout provided to Board members. She said that this is a format that allows the Board to look at the whole strategic plan in one document. The Board will fill in performance measures. This is results based accountability. This format is being encouraged by the Governor's office. We are looking at consistent reporting of performance. Ms. Deming said that she transferred the Board's work to this format. She said that the mission of the Board is "to protect the public health and safety". Now we want to identify the primary customers on this form. How much and how well are we doing (measures the effort and output) is anyone better off. We want to describe why this will work. With whom do you partners. This will require further conversations with the Board. What will it take to succeed? The subcommittee developed the action plan for the Board. The staff develops their own action plan.

Ms. Deming said that one theme that we discovered is that we have much of this in our current policies. We have a good IOP and we are identifying what is that we need to sharpen our focus on these things. Things you want to improve your performance on. Ms. Deschaine said that this is a clarification that continually needs to be made so that Board members understand their roles.

Ms. Deming referred to the handout and said that the second handout refers to having procedures and roles that are efficient; this is a goal. She suggested that the policy be reviewed and revised if needed. She commented that some items that were mentioned were to assure that new Board member orientation takes place and to define committee chair responsibilities. She pointed out the highlighted areas that are Board action plan items. She suggested that the Board members review mandated activities and give the Executive Director direction on priorities. The Board will monitor resources. She said that this document is a starting point. Ms. Deschaine said that the “reality check” is for reviewing policy and looking at the current situation in the current time and to revise policies that are 15 years old if needed. The Boards’ role is to see the current reality.

Ms. Deming said the Boards’ role is to review the IOP in communicating with the legislature and define the role of the legislative committee. Being clear on what the Board does. Job descriptions for Board members, committee chairs and officers.

Ms. Deming said that the next step is to take the list of suggested actions and start working on this list. Is this acceptable? This will be an ongoing conversation. Ms. Deming said that she will work with Ms. Biladeau and Mr. Spratt and will provide additional reports to the Board at a future meeting.

Mr. Jordan said that that he wanted to add some notes and focus on operational rules or principals. He asked members to look at page three “the board should support staff decisions”. What is the challenge process? This is a task that needs to be defined. He said he wants further discussion at a future meeting. Ms. Deschaine said that this is an appeals process and discussion at CRP and HPSP. These are processes that exist to support staff decisions. Mr. Jordan said that when the Board defines goals the staff is to implement the goals. There may be disagreement. How do we identify the differences in opinion in how the goals are met. Mr. Deschaine said that this was discussed and the Executive Director is responsible for implementing the Boards’ decisions. Understanding the delegation is important for the Board. Mr. Jordan said we do not have an existing Board challenge process. Mr. Schoenbaum said that this language can be clarified. Mr. Schoenbaum said that this is not day to day operations. But are the regulatory actions to apply to a regulated entity. We have an appeal process for that. We do not look at day to day operations. Mr. Jordan said we need a process for reconciling Board decisions. Ms. Deming said that this can be another discussion that needs to happen.

Mr. Jordan referred to page eight and asked “how does the Board speak with one voice”. We talk about it sometimes and the issue of the eight regions is a good example. How do we handle the conflict with the eight regions? We can misidentify roles; how do you speak for the Board not the individuals’ situation.

Mr. Jordan said that he wants further discussion on clear priorities referred to on page nine. Our financial situation is a concern. We want to discuss a more formalized role and we want to give guidance of how it should be done and monitor how it is done.

Mr. Jordan asked members to look at page six and he said that there should be a formalized reporting structure on how priorities are executed. This should be a regular report. If there needs to be additional ad hoc items then they can be discussed at a meeting. Ms. Deming thanked Mr. Jordan for his comments.

Ms. Deschaine thanked Ms. Deming and the committee members for their efforts. Ms. Deschaine said that this was a lot of work, discussion and debate.

Ms. Deming said that we want to keep this in the minds of the Board members. Mr. Spratt thanked the subcommittee members. Mr. Spratt said that this was a lot of work to bring clarity to the roles of the Board. Mr. Spratt thanked Mr. Jordan for his comments.

VII. Executive Director's Report

Biennial Budget Update

Ms. Biladeau said that in conjunction with the strategic planning process we are looking at workload. We have lost approximately 50% of our staff in the last eight years. What does that mean in terms of what will no longer be able to do? Ms. Biladeau said that we developed a chart showing statutory responsibilities and the hours needed to complete each. I can't say enough about what a wonderful staff we have at the Board and I want to thank staff for their efforts. Ms. Biladeau said the workload chart shows we have 384 hours a week of backlog in what we are required in statute and what we are able to accomplish with our current staffing.

The backlog hours do not include accumulated vacation time that is deserved. If we are looking at resources this should be taken into account as well as the Board members who volunteer a considerable amount of time. Ms. Nagy arranged 40 meetings which includes minutes for every meeting and preparation for each meeting. As we look at priorities for the Board this information will help guide the decisions. Mr. Norlen developed a projection of licensing inspection and the backlog of work with the loss of EMS Specialists.

Mr. Norlen provided a spreadsheet of performance measures for the various areas of responsibilities. Ms. Biladeau explained that we have a new e-licensing system and are working toward programing the system to automate data collection for these reports. Mr. Granger has done a great job working on automating data collection with the new system. This information is for planning purposes to show the Board a *complement of potential data* related to Board activities--it is not expected that this data will be reported every time, but *as a tool so the Board can let staff know what information would be helpful to them with strategic planning and planning decisions*. Mr. Guiton asked for this document to be e-mailed to Board members.

Special Projects

The sunset commission report is due September 1.

We are working with MAD to facilitate projects. She provided an example of the education requirements three ring binders that have been developed for research for the transition.

Mr. Schoenbaum asked what the staff count was and what is it now. Ms. Teske said we moved from the Minnesota Department of Health with 19 staff in 1996, this did not include student workers. Ms. Biladeau said that we have 10 staff now and will soon be hiring one more.

Administrative Officer

The new rehire will not be accepting the position because of a family emergency.

Statewide Ambulance Licensing Application

Ms. Biladeau said that she wanted to bring forward a policy discussion with the Board regarding three PSA requests being discussed at the capitol, in addition to a request for statewide licensure. These bills

have the potential to state-wide long-term impacts on public health in Minnesota. Ms. Biladeau said that she discussed this with the Board chair.

Mr. Spratt said that this is a challenge that will come before the Board and will make a significant policy impact. Sometimes issues need to be vetted. We need to follow due diligence. We do not want to get in into the weeds. We need thorough investigation before action. We need research before action. The radio policy is one result we have learned from about the importance of having sufficient information to make policy-decisions. My goal is to get the Board focused and reduce the drama and do good work.

Mr. Spratt said that there are options for the Board to consider and there will be a recommendation made.

We have developed a work plan for the statewide application. We must publish this information and follow the process as stated in statute. The application is published in the Registrar and if there are five letters of opposition there are several options--resolve the issues, withdraw the application, or go to contested case.

Policy Discussion

The Board can give full authority to gather information on the application but that would taint those Board members from voting in a contested case. Another option is to go to the full Board because this is an impactful decision. This is a better option in the advice of the Attorney General's office. There will be a lot of information that the Board will want. There may be need a subcommittee to review information, determine gaps and bring information to the Board. Another option is a facilitated plan to bring recommendations.

Mr. Spratt said that this involves health care reform and has very large implications statewide. This could flirt with the PSA issue and in this state today we have a high regard for the current system. I want to make sure that this is well vetted before it is brought to the Board. We want clear information to make policy decisions. My reaction is not to throw CRP under the bus, but my thinking is that this group should not be the only persons looking at this. We need a recommendation brought forward. My recommendation is that a committee be formed. I want discussion from Board members.

Dr. Fink Kocken said that this has never been done before. Mr. Snoke said that there is precedence for statewide licensure. Dr. Fink Kocken asked why we are doing this. Mr. Spratt said that he is not aware of a statewide licensure we need to review this. Dr. Fink Kocken said we could look at other states. Mr. Spratt said we are on the forefront of leading this charge. This is a new up front effort. Mr. Pearson said that only one other state has PSA laws.

Mr. Guiton asked if anyone else has a similar license and can the costs be incurred by the persons asking for the license. He asked if this is for scheduled only. Ms. Biladeau responded, yes scheduled only.

Mr. Spratt said he does not know if the requesting party can bear the costs for the case. Ms. Biladeau said that will be a discussion that would be brought to the Attorney General's Office for council.

Mr. Spratt said that this is a changing situation as we speak. This is a small part of the discussion. When we open this process and discussion I want us to make a well informed decision.

Ms. Deschaine said that she would like to see an educational piece for the Board. To trigger how this will impact ambulance providers and the citizens.

Mr. Spratt asked who should review this is. Mr. Spratt said that he sees a workgroup vetting this and bringing a recommendation to the Board. Mr. Spratt said that we want to incorporate health and the wide health care industry perspective. We do not want a group that is too large. He suggested the follow groups have representation:

- Minnesota Hospital Association
- Council of Health Plans
- Minnesota Ambulance Association and ambulance services including public, private, and tribal
- Medical Directors
- MDH Office of Rural Health and Primary Care
- State Fire Chiefs - EMS Committee

Ms. Biladeau said there are also some state resources that may be useful. She said that some of those would include health and human services and the U of M public policy and research departments to help pull information together.

Mr. Spratt said there is a formal request on the table and the Board needs to form a plan of action.

Mr. Guiton said that this is a very timely discussion and needs to happen quickly. Mr. Spratt said he agrees and would like to see a limited time frame of six months. This could significantly change how we do business. Health care is changing; EMS is public safety and health care. This is a new challenge as a Board.

Mr. Huffman said that the workgroup can have a discussion but the application has to be acted on. A decision needs to be made on the pending application. Mr. Spratt asked about a timeframe for action.

Mr. Jordan asked for the statute requirements. Ms. Biladeau said 144E.11 deals with the application process. The application process is clear. The task force can provide background but the Board must make the final decision.

Ms. Gaines asked about the statute and said that subdivision 2 uses the wording "prompt notice". What is the timeframe for prompt notice? Ms. Biladeau said that we rely on is advice from the Attorney General's office and we need to wait for an answer and review the documentation.

Mr. Huffman said that the primary issue before the Board is -- what the Board wants to do: delegate the decision or bring information to the Board for a decision and who will be making this decision.

Mr. Simpson said that the CRP should discuss the make-up of the committee and see if we have the expertise to discuss the issue.

Mr. Spratt said that the request in front of the Board is really two issues that are associated but not the same. Mr. Huffman said that every application has to be dealt with on a case by case basis. The Board can have a policy discussion but must act on each situation on an individual basis. Mr. Huffman said that Mr. Schaefer's opinion is that the Board makes the final decision.

Mr. Spratt said that the Board needs to look at the formal application and the outcomes to develop the process.

Mr. Huffman said that the Board makes a decision on the process. Once the application comes to the Board, the Board can receive comments from the public on why this is good or bad. He referred to statute. The administrative law judge makes a recommendation and the Board makes the final decision. This is a unique policy.

Mr. Schoenbaum said that if the Board receives an application and it does not have five objections is there a hearing. If it is routine and non-controversial the Board would make a decision. The Board would have a record, a report, and recommendations of the administrative law judge if this is controversial. If those are the two scenarios then the Board should be the decision making body.

Mr. Guiton said that the path he sees is that the staff needs to complete their tasks within the designated timeframe. The Board forms an advisory committee to look at this completely and then look at the judges' decision. This is two separate processes. This should be a Board decision and must be an informed Board decision. Mr. Guiton said that he feels that this will certainly be a contested case. Are there other entities approved to do this. We need advice from the judge on the case.

Mr. Guiton suggested an ad hoc committee to advise the Board. Mr. Huffman said the committee would review the application and bring information to the Board. The committee would include outside members. Mr. Huffman said that the outside members can give input in the public comment process. Mr. Guiton said that the interest groups should be informed of the discussion. The Attorney General's office advice is to have the full Board make the final decision.

Dr. Fink Kocken asked if this needs to be an action item for the Board. Ms. Biladeau said that this is an exception to the authority delegated to staff and is going back to the Board for policy discussion. Mr. Snoko asked for clarification of this statement. Ms. Deschaine said the process is delegated to staff and the final decision is made by the Board. Mr. Huffman said the committee would only make a recommendation to the Board. If the committee recommends denial there is still an appeals process. Staff provides appropriate notice and if a contested case is required then the case moves forward in that fashion.

Mr. Huffman said that it has been discussed to form an ad hoc committee or use the CRP.

Mr. Jordan asked how many applications will occur annually. Mr. Guiton said he would guess four. Mr. Spratt said that there would be additional applications from current services. We do not know how many. Ms. Biladeau said that there are 321 ambulance licenses. Mr. Spratt said that larger health systems would be the likely applicants. Mr. Spratt said maybe six and one will follow another.

Mr. Jordan moved that we create an ad hoc committee to review these applications for statewide license and their recommendations be brought forward to the board for action. (motion not seconded) Mr. Spratt said that we want to make it clear that this should be a full Board decision. Mr. Jordan said that we should use the CRP model but the Board makes the final decision. The full Board does not want to review the full application. We want a specific authority to accept and review all applications for statewide ambulance licensure. This review will be done in accordance with the criteria specified in Minnesota

Statutes 144E.11. Upon completion of this review the ad hoc committee will present its recommendation to the full Board for final approval.

Mr. Huffman said that you want the committee to only make a recommendation or follow the process. Mr. Jordan said that if there are five comments then this would automatically proceed to contested case. The committee must follow the statute. Mr. Huffman said that authority needs to be delegated to the committee. Mr. Jordan said that the work required in statute is delegated to staff. The committee provides a recommendation. If five or more comments are received, then the case proceeds to the hearing process. Then it comes to the Board. Mr. Huffman said if the committee decides not to recommend approval then the decision comes to the Board. Then there is an appeal process for the applicant.

Ms. Deschaine said that she is concerned that this has multiple levels. There are additional statutes that address this that may create conflicts. New licenses include PSA requirements. These statutes impact this request for a new license. She suggested an ad hoc committee for statute review before the application is reviewed.

Mr. Jordan asked about the conflict described in statute. Mr. Huffman said that this will require additional research by the Attorney General's office.

Mr. Jordan said he would withdraw his motion and asked for more information from the Attorney General's office on the pertinent statutes and what the potential conflict would be. We would need this conflict resolved before the application is considered.

Ms. Deschaine moved that the Board requests an informal opinion from the attorney general's office to review any possible conflicts that may exist in current statute in relationship to potential requests for new types of ambulance licensure. Mr. Guiton seconded the motion.

Ms. Deschaine suggested a separate motion for an ad hoc committee.

Mr. Spratt said that the intent is for the Attorney General's office is to evaluate the potential conflict. Ms. Biladeau said that we have had similar conversations as a staff. Each case is individualized and how you go through the process is individualized. When we have requests the staff has a pre-meeting to identify questions for the Attorney General's office and then we discussion with the requestor. The Attorney General's office provides clarification of the request. Your discussion would happen within the committee and would be more in-depth and be guided by the Attorney General's office. Who does what at what point.

Mr. Schoenbaum said we should do both. We should create a subcommittee and we should ask for an Attorney General's opinion. We would ask the Attorney General's office to report their opinion to the subcommittee and we would ask the subcommittee to report to the Board.

Ms. Deschaine said that staff review the application and ask the Attorney General's office for information. The staff makes a decision and follows the process that exists. If it is contested then it goes to ALJ.

Mr. Spratt said that a process exists and staff is asking for Board input on this decision. Mr. Spratt suggested referral to the Executive Committee for further discussion before further full Board discussion and action.

Ms. Deschaine withdraws her motion.

Mr. Huffman suggested not withdrawing motion and having Mr. Schaefer do this review and provide information to the Board.

Ms. Deschaine moved that the board requests an informal opinion from the attorney general's office to review any possible conflicts that may exist in current statute in relationship to potential requests for new types of ambulance licensure. Mr. Guiton seconded the motion. Motion carried.

Mr. Guiton said that the process is clear in statute. The process is clear that the Board makes the final decision and will receive the information needed to make this decision.

Mr. Jordan said that this could be a standing committee or an ad hoc committee depending on the situation. Mr. Norlen reported on how many license applications received in the past years. Mr. Norlen said that this could include PSA changes, new service requests, BLS to ALS upgrades. We have two or three applications in a year. This is an average. Since start of part-time ALS licensing we had a small increase. Some are related to license level change. Ms. Biladeau said that we may want to separate the simple cases from the other cases. Mr. Norlen said that if there are no comments then staff follows the options provided in statute and the process only goes to ALJ if there is conflict. Mr. Jordan said that we do not want to look at the other applications; we just want to look at this new special statewide application. This is a narrow time frame issue.

Mr. Huffman said that he is providing advice and this is a Board decision. If new services are making applications do you want to form a new committee to provide this advice again? Mr. Jordan said that this goes back to the strategic planning process. A standing committee deals with routine long lasting issues and an ad hoc committee deals with short term issues.

Mr. Pearson said that we should know about the issues that are brought forward for licensure. We need a consent agenda for Board discussion and approval. Mr. Spratt said that you are suggesting a consent agenda. If they are routine licenses then it is handled in consent agenda.

Mr. Jordan moved to create an ad-hoc committee designated with specific authority to accept and review all applications for statewide ambulance licensure. This review will be done in accordance with the criteria specified in Minnesota Statutes 144E.11. Upon completion of said review the ad-hoc committee will present its recommendations to the full Board for final action. Mr. Schoenbaum seconded.

Mr. Schoenbaum asked if this would delay action on the application. Ms. Biladeau said yes.

Mr. Schoenbaum withdrew his second. He asked to take the second part off the motion. Mr. Jordan suggested that we leave current process alone.

Mr. Jordan moved to create an ad-hoc committee designated with specific authority to accept and review all applications for statewide ambulance licensure. This review will be done in accordance with the criteria specified in MN 144E.11. Upon completion of said review the ad-hoc committee will present its recommendation to the full board for final action. Mr. Schoenbaum seconded the motion. Motion carried.

Mr. Pearson said that he will bring his discussion back another time for consent agenda questions.

Ms. Ryan Schultz said that we need the dimensions of the committee. We need size and scope of the committee. Mr. Jordan said that we want to wait for information from the Attorney General's office before further action is taken. Mr. Jordan said that we can ask for volunteers for the committee. Mr. Spratt said that this would be referred to the Executive Committee. Mr. Huffman said you have an application pending and this may delay the results. Mr. Guiton asked why this would delay the results. Ms. Biladeau said that the research is being done on how to publish the notice. We can start the process ASAP. Ms. Biladeau said we can accomplish this in two weeks or slightly more with workload. Once it goes to the state register there is a 30 day time frame for comments.

Mr. Jordan asked when the ad hoc committee needs to review information to make a determination. Mr. Huffman said that the committee does not have a time frame. Mr. Jordan said that the agenda item would be to have the committee formed at the next Board meeting. Ms. Deschaine said that the Executive Committee should meet before the next Board meeting.

Ms. Biladeau said that the Governors' budget recommendations were released with no decreases. However there were no increases. A contested case costs approximately \$20,000. We have sent out information for radio legislation and a quarter of the services have responded to bring radio communications into compliance.

Ms. Biladeau said that we are receiving non-regulatory support requests, such as, letters of endorsement and advertisement. This is for informational purposes and possibly a future policy consideration.

Mr. Jordan left the meeting at 12:50 p.m.

Mr. Spratt said that we will take a break and reconvene at 1 p.m.

VIII. Education Update

Ms. Biladeau said that the gap analysis was completed. There were informational rollouts for 245 participants. Ms. Biladeau provided information on a timetable on how to complete the transition. We need to verify programs. We created a manual for training programs and solicited input from educators. Ms. Consie provided input on this two-day session. Ms. Biladeau thanked staff for their efforts. Ms.

Biladeau said we met and created a manual for education programs and we are in the process of finalizing this information to provide to education programs. We hope to bring this to the Board in March or at the latest May for final approval. This is a change for 180 education programs. We will have transitional rollouts. We are seeking Board approval for the process. We will conduct Transition Rollouts from June through December. We would have a verification sign-off by the education program similar to the EMS Radio form. We want a single transition date. The registry is having a four-year transition. The Board final decision should occur before January 2014. Having multiple transitions dates would cost over \$30,000 in additional costs to support dual systems. We need to have compliance with volunteers. This is our recommendation to the Board. We are looking at online certification cards because a printed card is only good for the date it is printed. Ambulance services should be checking staff status on the website.

Mr. Guiton asked for the final date for change by the National Registry. Ms. Biladeau said that we did a comparison as staff. Ms. Teske said that when a card is expiring in 2014 has until 2016 to transition. Ms. Biladeau said that we will try for a transition date of October if at all possible, but it may need to be January 2014. If we present in this information to the Board in March then we want a transition date of October. Then we need time to have a compliance date of January 2014.

Mr. Spratt said that we are seeking a motion from the Board. Ms. Biladeau said we are going to communicate this timeline. Dr. Fink Kocken moved approval of the timeline. Dr. Thomas seconded. Motion carried.

Community Paramedic Education Program Update

Ms. Biladeau said that the motion was to adopt the Community Paramedic standards and the most current version of the curriculum for two years with review by the Medical Direction Standing Advisory Committee (MDSAC). The Board cannot receive the document because it is copyrighted. The Attorney General's office is involved in resolving the copyright issue and is in discussion with the copyright holder on a rider for the release of the copyright.

Dr. Thomas said that the MDSAC discussed this and asked if they are the right group to approve this. The physicians would have an opinion on the completeness of the curriculum. We do not have information to review so it has not been reviewed at this point. What do we do now?

Mr. Simpson asked for comments from the Community Paramedic programs that are teaching the course. Mr. Schoenbaum said that there is a trivial problem here. The Board has the authority to approve this. Mr. McAlpin said that there are discussions between the co-op and the Attorney General's office. The institute wants to protect the document as a trade secret. We are looking at publishing the document and then they would pay to use the curriculum. This requires further discussion. Once an agreement is in place the review can be accomplished quickly. Dr. Thomas said that there can be no approval until the curriculum is approved.

Ms. Deschaine said that at Hennepin Tech institute is a new program. The college has a curriculum review committee. This has been vetted at the college by educators. There was a site visit by EMSRB staff. A process was followed.

Ms. Biladeau said that the motion was to review the curriculum. The second part is that staff does not have expertise to review this as a follow-up onsite review for a new program. We expect this will change

that is why a two-year time frame was put in place. There will be rulemaking needed for assurance of public safety. This is multi-faceted. Ms. Biladeau said that she spoke to Dr. Thomas and the Board chair to express our concerns about this issue in having expertise to conduct the site visit. Inver Hills submitted an application on January 11 for classes that start in February. We want to help and we believe it is a good program. We need to have the details to bring forward for discussion. Mr. Schoenbaum asked if the Inver Hills program needs to be approved. Ms. Biladeau said yes. We have set precedence in approving programs and now need to move forward with this process. The Board is responsible for public protection. We grandfathered the first program and provided cards upon approval of the program. We set precedence and we need to discuss what the Board will do for future approvals. Students need to know that this is not yet approved by the state. We need clarity from the Board.

Mr. Spratt said that this discussion is not against these institutions. We need a Board process to review things. We approved education programs but did not see the curriculum and this set precedence. We do not want to continue to have the Board in difficult circumstances.

Mr. Spratt said that Inver Hills is requesting approval. We approved Hennepin without seeing the curriculum. He suggests that we sunset this grandfathering and have fully vetted programs before approval.

Mr. Guiton said that the curriculum was reviewed at the college. He said that a paramedic program is approved in a medical format. He does not know that this is happening. He said that the current program is showing great results. Inver Hills has a higher level of accreditation. Both these schools should show documentation of the curriculum. He agrees that physicians need to attend the site visits. Ms. Biladeau said that one copy was provided for physician review. Ms. Biladeau said that medical direction is included in the statute.

Mr. Huffman said that this request was discussed with the Attorney General's office. There will be more applications. The Attorney General's office advice is that everyone must receive pre-approval or this process must stop. The Board cannot be arbitrary and set a sunset. Mr. Schoenbaum suggested conditional approval with a revocation date unless documentation is received to continue the program. Mr. Guiton agreed and said that we have precedence for paramedic programs. He suggested using this same concept and approval process.

Ms. Deschaine quoted the statute (page 22) and said that it is not required that the curriculum be approved. The curriculum is approved by the college or university. The college or university is approved by the Board.

Ms. Simpson said that we do not approve curriculums for other programs.

Ms. Radant from Inver Hills said that there is a curriculum and standards (National Education Standards) the standards are developed at the college and approved by the accrediting agency. The school implements the course outline of what must be covered within the course.

Mr. Hjermsstad from Hennepin Tech said that this is not a secret curriculum. He said that he would support Inver Hills having a program. We must work together. He said that he thinks that Inver Hills must follow the same process for approval. Dr. Burnett said that we must address patient care. The Community

Paramedic is a great solution in the metro and rural areas. This is great for patient care. This affects real people with real problems. We want to keep these people healthy.

Dr. Fink Kocken said that the program needs to be approved by the Board or a national accreditation organization. We are approving the program. If we have a national organization that approves this then we are out of the situation. This is a Board decision.

Ms. Deschaine said that the college is required to follow an accreditation process for the curriculum. Dr. Fink Kocken said that the way that it is written is that the Board is responsible to approve the program. If a site visit is needed, if the Board needs to see a curriculum and that is a Board decision.

Dr. Thomas asked for current practice to approve a current program. Ms. Biladeau said that we use similar format for paramedic programs. That was our guide and that is the limit of the staff expertise. Do we need to go above this level? Dr. Fink Kocken asked if the list of requirements needs to change in statute.

Ms. Biladeau said that the Attorney General's office is suggesting consistency in the Board's decision.

Ms. Radant asked if Inver Hills should start classes before Board approval and have approval pending. She is asked for Board approval to start a class so an inspection can occur then then the program can have Board approval.

Mr. Guiton asked if a program wants to add another teaching level do they need to meet all the requirements. Ms. Biladeau said that as the level increases the standards increase. Paramedic programs must have additional approval because there are more requirements.

Dr. Thomas quoted the statute that said that you must have the basic level and add the other requirements to teach the paramedic level.

Mr. Huffman said that the Board is being asked for an approval from a training program to start a class. A Board would not make a recommendation on starting a class.

Dr. Thomas moved that the Board give conditional approval for Inver Hills Community College community paramedic program to begin and that a site visit and further requirements for the approval process would continue. This approval is given with the understanding that formal approval of the program may not be given. (motion not seconded)

Ms. Ryan Schultz said that the Board should not be strong armed because they are starting a class. We want the program to follow the approval process.

Ms. Deschaine said that you have to have a program in place to have something to review.

Mr. Hjermstad said that we had a program in place that received a certificate without a conditional approval of the Board.

Ms. Deschaine said that they can start the program but not receive state certification until the program is approved. Can we retro approve the cards?

Dr. Fink Kocken said that a similar thing happens for physician fellowship approval for boards. I don't know that we need to approve this right now, but we need our process in place for approval. How do you pay for these site visits?

Mr. Guiton said we do not have to give the students cards. We want to follow the same process.

Dr. Thomas withdrew the motion. Dr. Kocken said that we need to review the process and determine our approvals for the future.

Ms. Biladeau said that the payment would need to be a changed in statute.

Ms. Biladeau asked what precedence does this set for other programs. Can we put in requirements of notice for on-site inspection for education program approval? We do not have timeframe requirements. Can this be added to the application? This could be an improvement to the process. Mr. Huffman said that this can be a request. Can it be a requirement? This could lead to rulemaking.

Ms. Biladeau said we would not grandfather other programs.

Mr. Guiton said that the requirements for all other levels of programs are in statute. (Not Community Paramedic.)

Mr. Spratt asked if we need an action today. Ms. Biladeau said that we need information from the Attorney General's office and we need a decision from the Board on grandfathering programs. Mr. Huffman said that this must be a consistent decision. Ms. Biladeau said that we can have a staff review before the start date of class. Mr. Huffman said that Inver Hills is asking for approval. The Board is not required to take action until the requirements are met. If the Board does not want to take action today that is the Boards' decision. This needs to be a consistent answer.

Mr. Lee asked what the staff needs to do to approve this. Staff cannot approve them without them starting a class.

Ms. Biladeau said we are using a pre-set criteria similar to the one used for approving paramedic education programs approval.

Mr. Guiton asked how long would we back date cards.

Ms. Biladeau said that any decision made today sets precedence for the future.

Mr. Spratt said that Inver Hills can start the program and follow up with ESMRB staff to schedule a site visit. Ms. Radant said we want a date at Inver Hills. Based on the Attorney General's advice, Ms. Biladeau requested a policy decision from the Board to decide if we want to continue the precedence of grandfathering the practice of giving certifications to students in a program that had not been approved, but was approved later and how far back to we issue certifications. The issue for the Board to consider is that there is no way of verifying the level of education after the fact.

Mr. Simpson left the meeting at 2:10 p.m.

Consent Agenda from DPSAC

Mr. Norlen said that this chart shows the status of data releases. The DPSAC (on behalf of Dr. Satterlee) is recommending consent of the recommended action of the DPSAC for these requests for data.

Mr. Spratt left at 2:12 p.m.

Mr. Schoenbaum said one of the requests is from the Minnesota Department of Health (MDH). MDH has responsibility to look at hospital data and needs to know about the mental health cases in that area. MDH needs more information. How many cases go to another hospital? DPSAC approved a limited release of data. We do not want to release competitive data. MDH wants that data for research and would only release aggregate data. MDH is willing to sign an agreement on release of data. We are asking for consideration of release of this data.

Mr. Norlen explained that item one and two is number of patients. Item three involves zip codes and would have patient identifiable data. This would be a data privacy violation. We cannot reveal an individual patient. This was the discussion at DPSAC.

Ms. Biladeau said that one recommendation from the pre-hospital care work group is that data would not be released on a smaller scale than regionally.

Mr. Hierlmaier, (MDH) said that we are required to review data for additional hospital requests. We are reviewing patient level requests from DHS. We would suppress patient identifiable data in our report. We have strict data privacy requirements at MDH that all state agencies are required to follow. This request is to use the data at MDH for public interest review to determine if additional hospital beds are needed. We need information on distance for patient transports. This decision will happen at legislative level. We only report aggregate data.

Ms. Deschaine asked if the data can be received at the hospital level. She said that not all patients are transported by ambulance. Mr. Hierlmaier said that we are seeking information on a specific primary service area.

Ms. Ryan Schultz asked if the information can be sorted to only look at psychiatric transports.

Mr. Guiton said that the Board recommendation was to only release data at a regional level.

Ms. Biladeau asked the Board to consider whether or not this response sets precedence for DPSAC's work in setting criteria for data releases and should there be a further discussion with the Attorney General's office. What is different in granting this request versus another request for information by zip code especially if it is smaller than a region?

Mr. Schoenbaum moved to release data. (It was pointed out that he would have a conflict in this vote.)

Mr. Fennell said that he was a part of the pre-hospital care data committee that discussed what should be released and this is what they recommended the data be used for and is an appropriate use of data. Mr. Guiton said that is exactly what we asked the committee to do.

Dr. Fink Kocken moved to allow the release of information to MDH as stated in their request, pending a MDH data usage agreement with the EMSRB. Ms. Tanner seconded. Motion carried. Mr. Schoenbaum abstained from the vote.

Dr. Thomas said that this needs to be made clear in the minutes that the precedence is for a use by another state agency and includes a data use agreement.

IX. Regional Grant (extension or RFP)

Ms. Biladeau thanked the regions for their patience. Ms. Biladeau said that the Board has the choice of posting an RFP or an extension for continuing the EMS Regional contracts.

Dr. Fink Kocken moved to extend the Regional Grants for a two year period. Mr. Gormley seconded the motion. Motion carried. Mr. Guiton, Mr. Lee and Dr. Thomas abstained from this vote.

Ms. Biladeau said we are receiving request for new education programs. We are requesting a moratorium on programs until after the transition (until January 2014), since they programs will need to go through the transition process shortly which will require two applications and two reviews by staff. We have had four applications and this is for awareness to the Board that we are backlogged on our reviews. Mr. Lee said that the approval took four hours. How long for a site visit. Ms. Teske said that it is not just the site visit. If the program is not ready when they apply there are a lot of questions in the processing of the request. Mr. Norlen said that the staff does not approve the program this is a process.

Ms. Teske said that there is often not a medical director available for the program. Mr. Guiton said that a program must be ready before seeking approval.

Mr. Pearson left at 2:33.

X. Public Comment

None.

XI. Adjourn

Dr. Fink Kocken moved to adjourn. Dr. Thomas seconded. Motion carried. Meeting adjourned 2:35 pm.

Reviewed and Approved by:



4/9/13

Pat Lee, Secretary

Date

Kelly Spratt, Chair

Date