

**Consent Agenda
Agenda Item # 4
Full Board meeting, January 16, 2014**

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Note: CA refers to Consent Agenda.

A. Minor changes in procedures:

No changes

B. Executive committee – update

Items B1 through B5 were discussed at the *December 16, 2013 executive committee meeting*:

1. Community Paramedic Education Program Review – Workgroup: At the September 13, 2013 board meeting Dr. Fink-Kocken and Dr. Thomas were asked to review the North Central EMS Institute Curriculum. Dr. Fink-Kocken commented that neither she nor Dr. Thomas have the background to conduct a thorough review of the curriculum and approval of the community paramedic education program approval. The committee discussed the goal of setting standards and sustainability of monitoring these programs. The committee proposed that this would not be the job of the EMSRB.

Mr. Spratt suggested a workgroup be developed that includes a primary care physician, board physicians and others to discuss development of criteria for community paramedic education program approval in the future. Other suggestions for membership included those who developed the program and committee on accreditation of education programs for the emergency medical services professions (CoAEMSP).

In the interim, the board asked attorney general representative, Greg Schaefer, if there were any issues with limiting additional approvals while standards and approval processes are being reviewed. Mr. Schaffer said there is nothing prohibiting this. The executive committee offered a list of topics that include, but are not limited to, the following:

- core curriculum
- medical director oversight
- testing process
- continuing education
- internal structure for compliance by the EMSRB
- Minnesota Statutes 144E.28, subdivision 9
- legislative considerations
- review other physician extender licensing

The committee drafted motion B1 below for consideration by the Board at the January 16, 2014 meeting.

2. 2014 Legislation, the Minnesota ambulance association (MAA) will be carrying a bill in their legislative package to move MNSTAR data collection and EMS regional programs to the Minnesota Department of Health (MDH), Office of Rural Health with the caveat that EMSRB will continue to have access to this data. The Board voted at their September 11, 2013 meeting to explore long-term solutions for sharing MNSTAR data and moving the EMS regional program grants to MDH as a solution to the EMSRB capacity to meet large grant program needs.

Mr. Spratt reported on a meeting held on December 12, 2013 to discuss data and regional program needs. In Attendance: Kelly Spratt, J.B. Guiton, Buck McAlpin, Tim Held, Mark Schoenbaum and Pam Biladeau. Absent: Rick Wagner, Gordy Vosberg

Next step: MAA will draft the legislation and work out the nuances with MDH and EMSRB

3. Appointments and Staff Representation on Non-EMSRB Committees, upon reassessment of core mission and capacity the committee recommends that representation on the following committees be suspended and will be reviewed as options for providing representation change:

- Statewide Radio Board EMS and Hospital Interoperable Communications Workgroup.
- Statewide Radio Board Interoperability Committee
- Department of Public Safety and Department of Traffic Safety
- Crash Outcome Data Evaluation System (CODES)
- Towards Zero Death Leadership Team
- State Highway Safety Plan Steering Committee Traffic Records Coordinating Committee
- Minnesota Resuscitation Consortium

Continue attending as board priorities and time allows:

- State Trauma Advisory Council (Executive Director Reports)
- Rural Hospital Flexibility Program (Flex) Advisory Committee. State Trauma Advisory Council

Continue discussion at the February 20, 2014 Executive Committee Meeting:

- EMS Committee Medical Standards Committee, EMS Quality Committee
- EMS Regional Program Meetings
- Minnesota State Fire Chief's Association EMS Committee
- Minnesota Homeland Security and Emergency Management Senior Advisory Committee

Internal Operating Procedures (IOPs), scheduled January Review, given that the IOPs are being reviewed by the Ad Hoc Board Performance Workgroup, the committee recommends delaying this review until the workgroup presents its recommendations to the Board. (The committee drafted motion B2 below for consideration by the Board at the January 16, 2014 meeting.)

4. Trauma Deviation Request (144E.101, subd. 14), was received by the EMSRB on November 6, 2013 by Winona Area Ambulance Service. Requests are reviewed collaboratively by the State trauma advisory committee/EMSRB trauma system joint policy committee. Upon review of the request, additional information was requested on 12/18/13 and will be forwarded to the committee chair upon receipt. (Note: This is the first trauma deviation request the EMSRB has received since 2010.)

Standing Notation: Policy issues and questions can be routed through the board chair e-mail account at emsrb.boardchair@state.mn.us. Responses will be provided as appropriate.

Motion B1: To approve, in the absence of a national standard, the EMSRB in collaboration with industry leaders, will establish an ad hoc workgroup to recommend to the Board accreditation standards for community paramedic education programs.

Motion B2: To approve delaying the January review of the Internal Operating Procedures until the ad hoc board performance workgroup presents its recommendations to the Board.

C. Board decision making and motion practice

Standing Notation: The attached C1 “Consent Agenda and other motions formalizing Board action” overview is provided as a guide to motion practices. Board members should be prepared to evaluate and prepare motions before the Board under this general guidance.

D. Previous Board and executive committee minutes:

| Meeting Date | Meeting Type | Minutes | Attachment ID # |
|--------------|--------------|-----------------------|-----------------|
| 11/21/13 | Board | Board Action Required | D 1 |
| 10/30/13 | Executive | Approved on 12/16/13 | D 2 |
| 12/16/13 | Executive | Approval Pending | None |

Motion: To approve the meeting minutes for the meeting date of 11/21/13.

E. Office Reports:

1. Tribute to Board member Gary Pearson in the long-hot summer conference brochure, “...as founding father of the conference 25 years ago. It was his vision to bring relevant, practical, cutting edge information to pre-hospital care providers across the state of Minnesota.”
Long-hot summer conference: February 28 & March 1, 2014, Minneapolis Marriott Northwest.
2. Board Metrics Report, due on February 20, 2014, executive committee meeting, for quarter ending in December 2013.
3. Compliance Seminar Handouts were posted to the EMSRB website on November 15, 2013.
Link: <http://www.emsrb.state.mn.us/complianceseminar.asp>
4. National Governor’s Association Military EMS Certification Equivalency. The executive director attended an update meeting on November 26, 2013 regarding the National Governor’s Association Military Equivalency. NGA Goal: Using prior experience, expedite/fast track military veterans and their spouses into EMS careers without lowering standards. Assessments reside primarily in the purview of EMSRB approved education programs to assess competency and prepare students to pass the initial NREMT’s written and psychomotor tests.
5. Ambulance Services Licensing Retractions:
 - a. Jeffers Ambulance Service contacted the EMSRB on December 11, 2013 stating that they would be relinquishing their license through Minnesota Statute 144E.07, subd. 2 (retraction). Jeffers is working with the contiguous ambulance services to determine the coverage of their license/primary service (PSA). Jeffers is coordinating with the Cottonwood county sheriff’s office, public safety answering

point (PSAP) to ensure efficient transition of the PSA to the contiguous ambulance services. To date there have been there have been no issues with continual service.

- b. Tri-County EMS District—contacted the EMSRB stating that they are expecting to relinquish part of their license through Minnesota Statute 144E.07, subd. 2 (retraction) to Roseau EMS. (Note: Tri-county is a new update since the December 16, 2013 executive committee report).

6. Human Resource Changes:

- a. Administrative Services Unit Human Resource Representative has taken a position with the Veteran’s Administration; her last day is January 3, 2014. New hire may be in place by January 6, 2014.
- b. Debby Teske, publicly announced on December 16, 2013 that she will retire on January 3, 2014. Congratulation Debby! Thank you for your 20 years of state service! Please refer questions to Nick Blair at 651-201-2815 or nick.blair@state.mn.us . In preparation for her retirement and transition, succession planning included hiring Nick Blair, based on the January 31, 2013 Strategic Plan and May 29, 2013 board priorities.*
- c. Will Granger, EMSRB administrative support announced on December 31, 2013 that he was offered a promotion to business data analyst with Minnesota information technology division (MNIT). Congratulations Will! His last day will be on January 14, 2014. Will served as EMSRB e-licensing pilot project liaison over the last several years and has informed us that he will continue this support to the EMSRB in his new role.*

*Based December 16, 2014 executive committee report, positions are reviewed to look at gaps and opportunities to meet the January 31, 2013 Strategic Plan and May 29, 2013 board priorities and positions will be repurposed to better meet the needs of the agency, such as, investigation, budget and legal analysis support.

7. Education Standards Workgroup met on December 12, 2013 from 2-4 p.m. to review the November 21, 2013 evaluation report and celebrate the committee’s hard work. Gratitude and recognition was expressed on behalf of the board for their time, expertise and contributions towards protecting the public’s health and safety.
8. Compliance Seminar Handouts were posted to the EMSRB website on November 15, 2013. Link: <http://www.emsrb.state.mn.us/complianceseminar.asp>
9. BizGuide Project: In support of the Board value of *efficiency* the EMSRB is excited to announce that our agency was selected by the Minnesota information technology division (MNIT), innovation project recognized by Governor Dayton on December 3, 2013. There is no charge for participation in the pilot project which provides a business analyst to help answer the pilot project question: “What are the requirements for EMS personnel certification(s)?” (Refer to the 12/16/2013 Executive Director report, item 12, for details.)
10. EMSRB Website, the state of Minnesota is transitioning to a new website called Tridion. The old system will long longer be supported in the near future. The EMSRB expects to transition to the new site on mid to late January 2014. Transition costs are minimal (\$1,300.00 paid in FY 13). Prior to the transition announcements were posted on the EMSRB website on November 30, 2013. The next phase of the project will be to take advantage of the systems new features and helpful hints for navigating the site.
11. Communication Plan, staff continues to improve on a communications plan introduced to staff in 2013. The consent agenda and executive director report are part of this plan as well as proactive internal and external systems for communicating customer service expectations. This is a continuous process and periodic reports will be provided. The

education standard compliance seminar evaluation report provided on November 21, 2013 and proactive announcements to the public on the EMSRB website are part of these efforts.

F. Routine correspondence

1. Interested parties board meeting mailing list, requires recipients to annually re-affirm that they wish to remain on the mailing list--per Minnesota Statute 13D.04 and 2 (b) which requires that notice be provided 60 days prior to January 1, 2014 each year. Notification to current interested parties was e-mailed on November 1, 2013.
2. Narcan on BLS Ambulances, received a request from Kevin Sipprell MD, EMS medical director - Ridgeview ambulance service, Ridgeview medical center, on December 30, 2013 requesting Board consideration of adding BLS medication variance for naloxone (Narcan) for opioid abuse related care. Response: Board chair will place on the February 20, 2014 executive committee agenda.
3. Epinephrine Variance Prefilled Letter: Board delegated authority for final drafting of the letter at the 11/21/13 Board meeting to the executive committee. The final letter was approved by the executive committee on December 5, 2013 and e-mailed to Ambulance service and medical directors December 16, 2013. (attachment F1)
 - a. "Pre-filled" Epinephrine Doses, received clarification request from Gail Riemersma-Ambulance Director on December 16, 2013. Dr. Thomas drafted the following response; EMT's are allowed to give a "premeasured" dose of epinephrine per the Minnesota Rules 4690.8300 subpart 7. This law does not allow EMT's to draw up a medication dose. They could draw up epinephrine into a syringe and give the medication if it were *a single dose* vial of medication. That would be similar to the glucagon kit where they draw up the saline, inject it into a vial of medication and then give that "premeasured". The purpose of the premeasured dose is to eliminate a higher or lower dose of a medication being given in error. A single dose vial or a glucagon kit or Epi pen has only one possible dose to give. No overdose potential. The Pharmacy Statutes prohibit the *Medical Director* from drawing up multiple "premeasured" doses, because Medical Director's do not fit the definition of a Manufacturing Pharmacy with all of the sterility and Quality Control measures required by the FDA and other overseeing organizations.
4. Ann Gibson, Vice President, Federal Relations and Workforce, Minnesota Hospital Association requested information on Minnesota military equivalencies on October 21, 2013.

G. Standard contracts and grant extensions.

Standard contract and grant extensions will be reviewed by the finance committee and added to the full board agenda or consent agenda only if a decision is required or requested from the full Board.