

Summary Minutes

Meeting of the
Emergency Medical Services Regulatory Board
10:00 a.m., March 18, 2010
2829 University Avenue Southeast
4th Floor, Conference Room A
Minneapolis, Minnesota

Members Present

James Rieber, Chair
Dawn Bidwell
Brenda Brown
Lisa Consie
Bonnie Engen
Kathleen Haney
Michael Jordan
Paula Fink Kocken, M.D.
Pat Lee
Kevin Miller
Gary Pearson
Paul Satterlee, M.D.
Mark Schoenbaum
Matt Simpson
Marlys Tanner
Mari Thomas, M.D.

Members Absent

Michael Gormley
Rep. Jeremy Kalin
Sen. Gary Kubby

Guests

O. J. Doyle
Tom Fennell
Suzanne Gaines
Kjelsey Kluge
Earl Miller
Kristi Moline
Cheryl Pasquarella
Scott Reiten
Ron Robinson
Lance Ross
Bill Snoke

Staff

Katherine Burke Moore
Talia Landucci
Melody Nagy
Robert Norlen
Rose Olson
Debby Teske
Keith Wesley, M.D.
Geoff Karls (Attorney General's Office)

I. Complaint Review Panel (Closed Session)

Mr. Rieber called the meeting to order at 10:08 a.m. and said that the meeting will now go into closed session to discuss disciplinary matters.

II. Call to Order

Mr. Rieber called the open meeting to order.

III. Introductions

Mr. Rieber asked Board members and guests to introduce themselves.

IV. Approval of Agenda

Ms. Brown moved approval of the agenda. Ms. Tanner seconded. Motion carried.

V. Approval of Minutes

Mr. Simpson moved approval of the January 21, 2010 minutes. Dr. Thomas seconded. Motion carried.

VI. Chair's Remarks

Board Goals

Mr. Rieber said that we will have an updated version of this document available at a later time. The Board goals were discussed at the Executive Committee meeting today. A document was distributed that lists the goals and weights. Mr. Rieber explained the goals in more detail. He said that at the end of the year when the Board does the assessment of the Executive Director these provide a measurable value. Three is the standard to adequately perform the job 4 and 5

are enhancements or exceeding the goals. The Executive Committee added an objective for communication with the regional programs.

Mr. Rieber asked for a motion to accept and approve this document. Mr. Pearson moved approval. Mr. Jordan seconded. Motion carried. Ms. Burke Moore said that this was not listed as an action item on the agenda today.

State EOC Operations Plan Update

Mr. Rieber said that Mr. Norlen and Mr. Ross have been working on this. The plan is to improve the response for Minnesota. We discussed how much support is available to EMS staff to respond to declared disasters. We have developed a unified approach to the system.

Mr. Norlen said that as a state agency the EMSRB has specific responsibilities under the Governor's plan. This plan will help our agency better coordinate our response. The State EOC is open now due to potential flooding, but we have had no requests for assistance at this point, and we are monitoring the situation. The integration of this will bring the process together to provide a unified EMS response.

Mr. Pearson asked if there was a meeting in the Northwest region. Mr. Norlen said that there was a local meeting. Mr. Rieber said that FM Ambulance hosted a meeting. Mr. Rieber said that FM Ambulance has mutual aid agreements in place.

Mr. Ross provided a power point presentation on the coordination of response with the EMSRB. EMS in Minnesota will respond as a coordinated effort instead of a fragmented response.

Mr. Ross asked for Board approval of this plan. He said that Homeland Security has seen this plan and approved the concept. Mr. Rieber said that this has been a great cooperative effort. Ms. Engen asked for copies of the plan. Mr. Ross said that additional education will be provided on the plan. Mr. Rieber said that the final document was reviewed yesterday during the Executive Committee meeting. Ms. Tanner asked where the duty officer resides and was informed that it is a dispatch position at BCA. Local responders are trained to check with the county and then the state duty officer.

Mr. Rieber thanked Mr. Norlen, Mr. Ross and Mr. Robinson for development of this plan.

VII. Executive Director's Report

Budget Update

Mr. Pearson provided an update of the budget. Mr. Pearson said that he discussed this budget with Ms. Burke Moore. He suggested that the Finance Committee needs to meet in May and before the next session. We are 60% through the budget year and this is our budget status. Ms. Burke Moore said that this report is provided monthly and she is monitoring the budget because it is so tight. She said that grants are paid on a reimbursement basis.

Ms. Burke Moore said that we have a proposal at the legislature requesting the return of \$450,000 to our budget. In the house version of the bill there is a proposal for \$432,000 to be restored to the budget. This same information is not in the senate bill.

State agencies have been given a formula for reducing budgets in 2010/2011. The formula sets out a 6% cut from grants/contracts and a 3% cut from all agency operation lines. She said that she will inform the Board of the progress of this legislation.

Medical Director's Report

Dr. Wesley said that he has nothing to report.

Medical Director's Request For Proposal

Ms. Burke Moore said that we are preparing a RFP for a new Medical Director. Dr. Wesley will not be reapplying. We are basing the duties on what Dr. Wesley is currently doing.

Ms. Burke Moore said that we do not have a final budget and that will hamper what can be offered in the RFP. The budget for the medical director was greatly reduced and Dr. Wesley has provided a lot of free service to the Board. Ms. Burke Moore said that she wants to look at the budget before the amount is finalized. She said that we hope to have \$80 or \$90 thousand available for the next biennium.

Mr. Schoenbaum asked for a comparison of a contractor and a part-time employee to fulfill these duties. We need to make this clear that the Medical Director works for the Board. I do not know how this would work financially. Is it time to make a change? Ms. Burke Moore said that she would consider this option. Mr. Rieber said that he would like this to be reviewed by the Executive Committee for the core functions of a state medical director. This can be discussed at one of our meetings. What can we add on? Can this be multiple contracts for different functions? We need to communicate the core functions clearly. Ms. Burke Moore said that a letter was developed that list the core functions. Ms. Burke Moore said that she would provide information to the Executive Committee and the physicians on the Board. Dr. Thomas said the letter can provide a template.

Ms. Burke Moore said that she will be asking for volunteers to review the responses to the RFP. Mr. Rieber suggested appointing a committee at the next Board meeting.

Education Standards Workgroup

Dr. Satterlee said that this workgroup has met three times. He said that this was also discussed at the Medical Direction Standing Advisory Committee meeting.

Dr. Satterlee said that we discussed the current standards and how we will adopt the new standards. There was a discussion of minimum hours affecting volunteerism. We discussed the pros and cons. This is a national standard. We have created a timeline for presentation of information to the Board, a legislative plan and an education plan. We will be meeting in April for further discussion. Mr. Rieber said that he is referring questions on these changes to EMS staff for response.

VIII. Complaint Review Panel Report

Ms. Bidwell reported that the panel met twice since the last Board meeting.

- 145 Disclosure files were reviewed (139 passed with no further action required, more information was requested for three cases, one conference invitation will be issued, two registrations/certifications were denied.
- 6 complaints/mandatory reports were reviewed (one was closed, the Attorney General's office was requested to prepare an agreement for corrective action for one case, and a petition to suspend for one cases, there were three child support/revenue suspensions.

- One Stipulation and Order was signed.

IX. Legislative Committee Report

Mr. Miller said that the committee met on March 10. The Legislative Committee will be meeting on a standing basis every Wednesday as needed during the legislative session. The committee will be discussing the status of legislative issues. We need to have a defined quorum for these meetings. The start time is 8:30. This is a phone meeting. Ms. Burke Moore said that we must also have at least one Board member present at the meeting site of a telephone meeting.

Mr. Rieber said that he wants the committee to meet and focus on issues before things are brought to the Executive Committee. This gives more involvement and Board input on issues between meetings.

Mr. Miller said that a bill was introduced but missed a legislative deadline. The bill included language that would give money to municipalities for ambulance service costs. Ms. Burke Moore said that she requested a fiscal note because current EMS staff could not cover these additional duties.

[Note: Mr. Norlen explained that we are upgrading MNSTAR and have encountered some technical difficulties. That is why I left the meeting for a minute.]

X. Trauma Triage Guideline Submission Report

Mr. Norlen provided a handout of the status of submission of the guidelines. Staff has reviewed these guidelines and the services listed on the handout meet the requirements.

Mr. Rieber asked for a motion to approve the guidelines for the ambulances listed on the handout. Ms. Bidwell moved approval. Ms. Consie seconded. Mr. Norlen said that the deadline is July 1, 2010. The statute requires approval of the guidelines. This will have to occur at the May Board meeting.

Mr. Miller asked if it would be a conflict of interest for Board members who are affiliated with an ambulance service. He stated that this does not have financial impact for the Board member. Mr. Norlen said that some of the other guidelines have been submitted and need review. Mr. Karls confirmed that there is a conflict of interest.

Mr. Norlen said the deviation committee needs to meet. Mr. Miller asked what is the consequence if an ambulance service does not meet the May deadline. Mr. Rieber said that one option is to have a special Board meeting in June. Mr. Norlen said that we provided information to services on the timeline for submission for Board approval.

Mr. Rieber said that the guideline is an assessment tool. Mr. Norlen said that staff would find it difficult to approve guidelines without complete information. Mr. Miller said the panel is only for deviation requests. Mr. Rieber said that the obligation in the statute is to transport to an appropriate facility within 30 minutes or you must apply for a deviation of the requirement you do not need to name the hospital.

Mr. Pearson said that this is a good exercise. Trauma center designations are changing and I agree with Mr. Rieber on this discussion. Mr. Rieber said that where you transport the patient

varies based on the situation – you must just meet the guideline of 30 minutes. Ms. Burke Moore said that the state role is to assure that you have gone through the process to determine compliance. Mr. Rieber said that staff is overstepping their regulatory authority. The Board must assure compliance with the statute.

Mr. Norlen said that he will comply with the wishes of the Board and the panel could discuss this issue. Mr. Jordan said that even if the hospital is within the required distance the issue is how long the transport took. How long does the driver take to get to the hospital? Mr. Jordan said that the staff does not need to make more work for itself. Mr. Pearson said that if a service makes a statement that we will transport within 30 minutes then we are in compliance. Mr. Rieber said that we conducted this exercise as staff but will not put this in a legal document.

Mr. Norlen said that the review panel will consider deviations and could also consider questions from staff. Mr. Schoenbaum said that the value of MNSTAR data for the trauma system will be time of transport. Mr. Miller said that we need to communicate this deadline to ambulance services. This needs to be made very clear to ambulance services. Mr. Rieber said that there is not another Board meeting after the May Board meeting. Mr. Norlen said that he has sent this information to services as an email and the EMS Specialists will be calling services.

Mr. Rieber asked for a vote on the motion. Motion carried. Mr. Lee, Mr. Miller, Dr. Satterlee, and Mr. Simpson abstained from this vote.

XI. Executive Committee Report
Report of ED performance evaluation

Mr. Rieber said that this will be tabled until the next meeting.

XII. Medical Direction Standing Advisory Committee Report
Proposed MDSAC IOP changes (action item)

Dr. Thomas said that the IOP changes were discussed at the last committee meeting. Several things were considered regarding the MDSAC language in the IOP; including whether non physician members should be included on the committee and a discussion of what make up a quorum. The IOP has not been followed for quite a while. The top portion of the document is the suggested changes. The committee was definite about the group being physicians only. Other persons may present information to the group. The members discussed regional director physician participation. This is being discussed with the regional programs. Other physicians can be part of the committee. Dr. Lilja provided a historical perspective for the committee. We decided that applications to the committee will be in writing and that will define the quorum. Membership will be for two years and will be reviewed in January of the even number years with review of the Board IOP. We also included language for removal if three consecutive meetings are missed. Dr. Thomas asked for a motion to update this in the Board IOP.

Mr. Rieber agreed that this language should be placed in the IOP. Mr. Miller moved approval Ms. Bidwell seconded. Ms. Bidwell asked for the total number of committee members. Dr. Thomas said that we will have a minimum but did not address the issue of too many members. The “Board” chair appoints the chair of MDSAC. Dr. Thomas clarified that members must apply. Mr. Snoke said that this should be changed to “may” apply. Mr. Karls said that this is not a problem in the legal definition. Motion carried.

Ms. Pasquarella asked for the implications of approval by the Board. Dr. Thomas said that the Board is required to change the IOP. Dr. Fink-Kocken said that this is a committee that provides opinions to the Board for action by the Board. This is an advisory committee.

Dr. Wesley asked if there was a discussion about an alternate attending instead of the regional program physician. He suggested adding the regional program representative or appointed alternate. Mr. Rieber said that the alternate needs to be a named individual.

Proposed Recommendation to JPC on CDC Field Triage Criteria

Dr. Thomas said that Dr. Lilja brought up a recent report from the CDC. He asked that the Board make a recommendation of adoption of the CDC field triage criteria. The 2006 version is the one being voted on today. The 1999 version is out of date. Dr. Thomas said she has the full report available for review. Dr. Hunt assisted in the development of this. Dr. Lilja said that he would ask Dr. Hunt to present this to the JPC.

Mr. Schoenbaum said that last fall the MDSAC looked at the initial trauma triage guidelines and decided that they were overly prescriptive and complex and asked the trauma advisory committee to review one section. The STAC did this in record time to provide information to ambulance services. Mr. Schoenbaum said that the current state guidelines are clearer than the CDC document. He said that we are facing a major deadline and do not have compliance from 60% of ambulances. This is not the time to change the information provided to the ambulance services. He said that he would not recommend a change at this time. He would be in favor of having STAC review this information. Dr. Thomas agreed that this adds in vital signs and provides a national standard. Dr. Thomas said that the MDSAC recommendation is to look at these standards. Mr. Miller asked for the precedence of making changes.

Dr. Wesley said that the differences are less important, what if staff are using the CDC program for education. These guidelines are not that far apart. This is something to recognize. This is a federal curriculum. Dr. Wesley asked that this be considered by STAC for education. Mr. Schoenbaum agreed that this could be used for continuing education. Mr. Rieber said that this could be approved because it exceeds the minimum standards.

Mr. Reiten said that the RTACs can discuss this issue at the local level.

Mr. Rieber asked for a motion. Mr. Schoenbaum moved that this be considered by the JPC for review. Dr. Fink Kocken seconded the motion. Motion carried.

Dr. Thomas said that we discussed setting goals and we are seeking input for the next meeting.

XIII. Other Business

Ms. Bidwell said she accepted the presidency of the Minnesota EMS Educators Association and we will be meeting to work on items for EMS.

Mr. Rieber said that the state is opening a MNTRAC coordination center to provide information on the flood response. This will provide information to services and services need to be trained on MNTRAC in order to access this site. This is a good public relations tool to provide information. Mr. Norlen said that MNTRAC is a web based system owned by MDH and it provides information on bed availability for hospitals. It includes information from public health and can provide information to assist in disaster events. MDH asked the EMSRB to be administrators to the system. The EMS Specialists are trainers for the system. System access requires a user name and password. We currently have 50 – 60% of the users across the state

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trained on MNTRAC. You may be invited to review information on the website. This also includes a patient tracking component that is being developed by MDH which will also be used for mass casualty events. If ambulance services need training they should contact the EMS Specialist in their region. This is best done with a computer lab and has been conducted in conjunction with our regional program partners.

Mr. Rieber welcomed Geoff Karls as our Attorney General's representative.

XIV. Public Comment

None.

XV. Adjourn

Dr. Satterlee moved adjournment. Ms. Brown seconded. Motion carried.

Reviewed and Approved by:

Pat Lee, Secretary

Date

James Rieber, Chair

Date