State of Minnesota
Emergency Medical Services Regulatory Board
Executive Committee Meeting Agenda
June 20, 2019, 9:00 a.m.
2829 University Avenue Southeast
University Room, First Floor
Minneapolis MN 55414

Map and Directions

1. Call to Order – 9:00 a.m.

2. Review and Approve Agenda – 9:02 a.m.

3. Public Comment – 9:05 a.m.

   The public comment portion of the Board meeting is where the public is invited to address the Committee on subjects which are not part of the meeting agenda. Persons wishing to speak are asked to complete the participation form located at the meeting room door prior to the start of the meeting. Please limit remarks to three minutes.

4. Review and Approve Meeting Minutes – 9:10 a.m. M 1

5. Board Chair Report – 9:15 a.m. BC 1
   • Response to MAA Letter

6. Executive Director Report – 9:25 a.m.
   • Agency Report

7. New Business – 9:50 a.m.

8. Adjourn – 10:00 a.m.

If you plan to attend the meeting and need accommodations for a disability, please contact Melody Nagy at (651) 201-2802. In accordance with the Minnesota Open Meeting Law and the Internal Operating Procedures of the Emergency Medical Services Regulatory Board, this agenda is posted at https://mn.gov/emsrb

Next Meeting:

August 15, 2019
10:00 a.m.
2829 University Avenue Southeast
University Room, First Floor
Minneapolis, MN 55414
State of Minnesota
Emergency Medical Services Regulatory Board
Executive Committee Meeting Minutes
April 18, 2019

Attendance: J.B. Guiton, Board Chair; Megan Hartigan; Jeffrey Ho, M.D.; Kevin Miller; Matt Simpson; Tony Spector; Executive Director; Lucy Ross, Grants and Financial Manager; Melody Nagy, Office Coordinator; Greg Schaefer, Assistant Attorney General

Absent: Aaron Burnett, M.D.

1. Call to Order – 10:00 a.m.
   Mr. Guiton called the meeting to order at 10:11 a.m. He asked for introductions from members and guests.

2. Review and Approve Agenda – 10:12 a.m.
   Mr. Guiton asked for a motion to approve the agenda.

   Motion: Dr. Ho moved to approve the agenda. Mr. Miller seconded. Motion carried.

3. Public Comment – 10:05 a.m.
   The public comment portion of the meeting is where the public is invited to address the Committee on subjects which are not part of the meeting agenda. Persons wishing to speak are asked to complete the participation form located at the meeting room door prior to the start of the meeting. Please limit remarks to three minutes.

   None.

4. Approve Minutes – 10:10 a.m.
   Mr. Guiton asked for a motion to approve the minutes.

   Motion: Mr. Miller moved to approve the minutes from the February 21, 2019, Executive Committee meeting. Dr. Ho seconded. Motion carried.

5. Board Chair Report – 10:15 a.m.
   None.

6. Executive Director Report – 10:30 a.m.
   Agency Report
   Mr. Spector said the EMS Specialist posting is closed. He said he will be reviewing the applications received.

   Mr. Spector said that the recent EMS renewal cycle which concluded on March 31, 2019 presented certain challenges due to data entry errors when there also were sporadic issues with the eLicense system’s interface with the NREMT. Despite these challenges, staff resolved these challenges, and the renewal cycle was a success.

The Mission of the EMSRB is to protect the public’s health and safety through regulation and support of the EMS system.
Mr. Spector said MN.IT has informed the EMSRB that the Surface Pro computers issued to staff and Board members are slated for replacement. There is a Dell version of a Surface Pro that may be a suitable replacement. Mr. Miller asked about remote login. Mr. Spector said there is access to the Microsoft 365 platform. Mr. Spector said the purpose of having Board members have a separate devise is to keep state data separate from personal or employer data. Mr. Spector said he has been working on removing the EMSRB from the ASU shared IT platform.

Mr. Spector said the lease for the current EMSRB office space expires in January 2021. He continues to have discussions with a space planner regarding EMSRB space needs. There are maintenance problems in the current office space.

eLicense Update
Mr. Spector provided metrics regarding applications submitted through the eLicense portal as well as certification metrics. Mr. Miller asked how many individuals did not renew. Mr. Spector responded that staff are reviewing those numbers.

Hennepin Technical College Community EMT Education Program Update
Mr. Spector said he met with Amber Lage and Anne Mathiowetz last week and reviewed the curriculum provided. The deficiencies in the curriculum were discussed and they will be providing a corrected document to the EMSRB.

Grants Update
Ms. Ross said the Request for Proposals (RFP) was published on Monday, April 15, 2019, in the State Register. Ms. Ross referred to the project timeline in the PowerPoint presentation. The deadline for submission is May 15, 2019. The EMRB requests that questions on the RFP be submitting by email and the response will be posted to the EMSRB website. An application review committee will be formed to bring recommendations to the Board. Ms. Ross said a special Board meeting has been proposed for June 20, 2019, to vote on the proposals received. The current grant contracts expire June 30, 2019. A new grant agreement will be provided by the end of August. Mr. Spector said the RFP is published on the EMSRB website and was shared directly with the Regional Programs and as an email through the GovDelivery system.

Ms. Larson asked about submission of work plans with the application. Ms. Ross responded with a clarification of the submission requirements.

Mr. Robinson asked for clarification of the term collusion in the RFP. He said he works with other regions on projects. Ms. Ross said she does not remember that the term collusion is in the document, but collaboration is encouraged. Mr. Robinson asked about the minimum and maximum support funds. Ms. Ross said the EMSRB is allowed by statute to keep up to five percent of the award for administrative purposes. Mr. Spector said there are costs to administer the grants. Mr. Spector said it is his understanding that MDH keeps a higher percentage of grant administrative costs.

Regional Program Volunteer Training Grant Contracts (FY 2019)
Ms. Ross said the $20,547.00 (per region) is carry-over of unspent volunteer training reimbursement funds from fiscal year 2018. The contracts were submitted to the Department of Administration Small Agency Resource Team (SmART) for encumbrance and once final approval is received the contract will be provided to the Regional Programs. The grants will be retroactive to January 1, 2019.

Ms. Larson expressed some concern about the timeline. Mr. Spector said he will have a conversation with SmART to expedite contract approval.
Emergency Medical Services for Children Grant (FY 2019 – 2020)
Ms. Ross said that the HRSA grant (EMSC grant) is in year two of a four-year cycle. Ms. Ross said she is working on bringing the EMSRB into reporting compliance. SmART needs to draw this funding from the federal payment management system.

Ms. Ross said she is working on the new grant agreement for EMSC. The EMSRB will retain 10% of the funds for administration of the contract. Mr. Spector said prior contracts administrative funds were at a higher rate.

East MRCC and West MRCC Grants (FY 2020)
Ms. Ross said the MRCC grant contracts are due July 1, 2019. The funding amount is $683,000.00 with a 10% administrative fund retained by the agency. Mr. Spector said MRCC East and West met with the Department of Public Safety to discuss an increase to their funding. EMSRB, notably, was not invited to this meeting. Mr. Spector learned that DPS had expressed some concern the MRCCs using grant dollars for salary reimbursement. The MRCCs are pursuing a legislative change to increase its grant funding.

7. Legislative Session Update – 11:30 a.m.
Mr. Miller said some bills have been moved forward and included with omnibus bills. Mr. Miller suggested that he and Mr. Spector should have a meeting with John Swenson, Director of Public Safety from the City of Lino Lakes, regarding PSA changes.

Dr. Ho asked about exploring seeking the fine amounts for distracted driving fines and hands-free phone fines. Mr. Miller said he will look at this, but it is not an EMSRB statute that would need to be changed. Dr. Ho asked about the emergency hold scenario in statute. Mr. Miller asked if MDSAC has a consensus opinion. Dr. Ho said that EMS personnel are not protected. Dr. Ho said nursing and other boards could be involved in this.

Mr. Schaefer asked about the staffing model issue. (Mayo proposal). Mr. Miller said there is a hardship statute to assist services experiencing difficulties. Mr. Guiton said in some areas of the state there are ambulance services that are five miles apart and some collaboration could occur. Mr. Miller said that this comes to the attention of the Board when there is a deficiency in meeting statute. Mr. Spector said he is willing to work with services when these problems are reported. Mr. Miller said that this is an opportunity to have collaboration with the Regional Programs because they know who is struggling.

8. Committee Reports – 11:45 a.m.
CRP/HPSP
Mr. Simpson said the committee meets monthly.

Data Policy Standing Advisory Committee
Ms. Hartigan said once the Data Manager position is filled there will be a push to move to MNSTAR version 3.

Mr. Spector said there will be an effort to transition services off paper forms and upload data directly to MNSTAR.

9. New Business– 12:00 p.m.

None
10. Adjourn – 12:10 p.m.
The meeting adjourned at 12:10 p.m.

Reviewed and Approved By

Megan Hartigan (by email)  6/10/19
Board Secretary/Treasurer  Date
MEMORANDUM

Date: June 13, 2019

To: EMSRB Executive Committee Members

From: Tony Spector, Executive Director

Re: Correspondence from the Minnesota Ambulance Association

I want to make the Executive Committee members aware of a letter the EMSRB received on May 20, 2019 from Mark Ebeling, president of the Minnesota Ambulance Association; the document is attached. The EMSRB prides itself on maintaining transparency and professionalism, and to that end I want to make sure you receive the letter. I also want to clarify information within the letter and take this opportunity to update the Committee on the status of projects to date and my plans in the near future:

First paragraph:

Regarding staffing, we are on track to hire the new Grants & Financial Manager and EMS Specialists within the next several weeks. Our Data Manager & Analyst is anticipated to begin in July 2019. And our student worker (obtaining his degree in computer science) joins the EMSRB on June 14, 2019. The remaining positions will be filled throughout the summer.

As I explained to the full Board at last month’s meeting, my tasks and responsibilities related to hiring include creating the candidate application scoring matrices, scoring the applications, crafting the interview questions, seeking members for the interview panel, scheduling the interviews, seeking members of a second panel (if necessary), conducting the extensive reference checks, and onboarding the new employees. Hiring is mission-critical, and unfortunately I do not have staff to whom I can delegate some of these important tasks. To be clear, these are important tasks. My goal is to hire the right person for the right position, or to use a descriptive idiom: Hiring the right person for the right seat on the right bus so the bus goes in the right direction. The State’s H/R function is very helpful, but to a point due to our service level agreement. To keep the process moving forward, I have contracted out (and will continue to do so) some of these H/R responsibilities. For example, our grants consultants (and I) were the interview panel for the Grants and Financial Manager position. The consultants aided in scoring the applications, crafting the questions, and scoring the interview and writing samples.

Nevertheless, I take Mark Ebeling’s concern and criticism to heart, and indeed I share it.

Regarding ambulance inspections, the practice has been to conduct inspections of an ambulance vehicle once every two years. The full inspection cycle had been tolled by the EMS Specialists during the build-out of our eLicense system. Ambulance vehicle inspections were occurring during this time, but not nearly at the previous frequency level.

The Mission of the EMSRB is to protect the public’s health and safety through regulation and support of the EMS system.
Ambulance inspections historically were scheduled with ambulance services several weeks to several months out (more often the latter). The practical effect of this process was that the inspection process did not objectively assess the operational readiness of the vehicles, and I had been told many times that assessing operational readiness is a key component of inspections.

A recent review of certain historical ambulance service inspection data revealed that the correction orders issued were for what could be described as de minimis events that did not and would not compromise patient care. Nevertheless, the practice of the EMSRB inspecting ambulance vehicles is important for a variety of reasons, including ensuring the safety of the vehicle (to the extent of our authority). Inspections also allow the EMS Specialist to engage with the service director, obtaining and maintaining that positive relationship; this is a very important function.

As has been discussed with the Board as well as the MAA, the EMSRB has been exploring a different inspection paradigm. To better ensure a vehicle’s operational readiness, the EMSRB will be trying a process of spot inspections, or inspections with limited notice. Likewise, instead of inspecting every vehicle (e.g., all 74 Allina rigs), staff will be conducting sampling inspections, (e.g., one or two) and if the ambulances "pass muster," then the inspection process would conclude. If, however, an issue trend is discovered, then additional vehicles would be inspected. For smaller services (i.e., one or two ambulances) the full compliment of vehicles would be inspected.

Fire safety inspections occur with little or no notice. Restaurant health and safety inspections occur with little or no notice. Cosmetology site inspections occur with little or no notice. To be sure, I am not trying to create a more draconian or dictatorial process. Rather, I am trying to create a process that more objectively protects the public’s health and safety. Again, this has been shared with the MAA.

As it relates to ambulance stickers, Minnesota Rule 4690.8000 requires that the board issue a certificate to each licensed ambulance and the certificate must be affixed to the vehicle. The practice has been to place a general, unnumbered sticker on the right-most window on the ambulance rear doors. The practical effect is that there has been no way to track an issued sticker to a particular ambulance. There has been no way to look at a sticker, determine its date of issue, or determine to which ambulance it was issued. In addition, the current EMSRB sticker has been criticized by services because the strong adhesive damages/removes the vinyl window covering. We learned from our vendor that the adhesive found on these stickers is the same type used to place stickers on highway road signs. The vendor has informed us that our current adhesive is not what should be on our stickers. We have been working with our vendor for a better options which include stickers of different colors signifying in which year it was issued as well as a numbering scheme so an EMS Specialist can simply enter the sticker number into a database and learn the date the sticker was issued as well as the history of that particular vehicle. In the interim, we can supply services with the current stickers for their ambulances despite the above-described issues.

**Second paragraph:**

The second paragraph notes states that about two years ago I presented to the MAA and the Medical Director's Conference the new vision for staffing. That statement is false. In reality, the presentation occurred nine (9) months ago. You may recall that we began working with our
consultant in July 2018, and our new model was presented in September 2018 at the Medical Director’s Conference and full Board meeting in Alexandria.

At the 2017 Medical Director's Conference we were rolling out our new eLicense system. In September 2016 we were on the paper/pen application process.

As noted above, we are on track to be hiring a new Grants & Financial Manager and two EMS Specialists within the next several weeks. We anticipate the Data Manager & Analyst will be joining the EMSRB in July 2019. A part-time student worker will be joining us on Friday, June 14, 2019. The remaining positions will fill thereafter.

Third Paragraph:

Regarding the Volunteer Training Reimbursement Supplemental Funding Grant, on or about November 8, 2018, we sent each of the eight regions a correspondence announcing the plan to award a limited purpose grant consisting of unspent volunteer training reimbursement funds. We asked that they return their work plan on or before December 15, 2018.

Toward the end of December 2018, we gave a conditional job offer to a candidate (conditioned on the criminal background check) to serve as our Grants and Financial Manager. Our goal was to onboard her as quickly as possible so she could tackle the VTR project. On January 2, 2019, we received word that she had passed the background check. In an effort to maintain her then-current rate of pay at the State, we were required to craft a detailed memorandum to Minnesota Management and Budget (MMB). I submitted this memorandum on January 7, 2019. On January 23, 2019, I received word from MMB that my request was approved. Immediately thereafter, the candidate accepted the formal job offer with a start date of February 13, 2019. After onboarding, one of her first tasks was to address the submitted VTR work plans and work collaboratively with the regions to correct their submission deficiencies and issues. Once the regions resolved the deficiencies and issues, contracts were executed and related back to the beginning of the year.

As it relates to the assertion that the above process left the regions with unnecessary financial hardship, it is important to note that all of our regional grants utilize a reimbursement model; the regions are not given a grant award that is deposited directly into their respective bank accounts. Receipts and invoices are submitted to the EMSRB and compared to the work plan. Where (and when) appropriate, payments then are authorized.

The EMSRB worked diligently and timely to address the various work plan deficiencies, working with the regions toward prompt resolution. All resolved work plans were approved up to the full grant amount. If the regions chose to incur debt prior to receiving the notice of grant award, that is an issue beyond the purview of the EMSRB.

Paragraph three also addresses the RFPs for the regional support and relief (i.e., seat belt funds) grant dollars. The MAA states that the RFPs "... are typically rolled out in January, giving regional programs a couple of months to put their proposals together." That statement is false. The last regional RFP process occurred in March 2015 (which preceded my arrival) and what follows is a screenshot from that RFP:
Please note that the last RFP had a 30-day submission window. The current RFP had a 30-day window.

The MAA asserts that the current RFP changed format. The current RFP documents and spreadsheets are very similar from the 2015 RFP; they served as the template for the current RFP.

This RFP’s release was on par with the last RFP release, the timelines are nearly identical, and the formats are nearly identical. Moreover, the current RFP process structure was designed to ensure that there is no funding gap between the two funding periods. Below is a screenshot of the current RFP process and timelines; it is included for purposes of comparison.

### Request for Proposal (RFP) Process and Timeline:

<table>
<thead>
<tr>
<th>Process Item</th>
<th>Timeline</th>
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<tbody>
<tr>
<td>Request for Proposal application period</td>
<td>April 15, 2019 – May 15, 2019</td>
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<tr>
<td>Deadline for applicant question submission</td>
<td>May 13, 2019</td>
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<tr>
<td>Deadline for application submission</td>
<td>May 15, 2019</td>
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<tr>
<td>Anticipated review and selection period</td>
<td>May 16, 2019 – June 10, 2019</td>
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<td>Selected proposals reviewed and accepted/rejected by Board:</td>
<td>June 20, 2019</td>
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<td>• Ten (10) minutes per applicant will be allowed, but not required, for question/answer time (applicants will be allowed to call in)</td>
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<tr>
<td>• Successful grantees will be designated as a result of this meeting</td>
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<tr>
<td>Existing grantee contract expiration date</td>
<td>June 30, 2019</td>
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<tr>
<td>New grantee contract term begins</td>
<td>July 1, 2019</td>
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<tr>
<td>Deadline for grantee work plan submission</td>
<td>July 30, 2019</td>
</tr>
<tr>
<td>New grant agreements in place</td>
<td>August 30, 2019</td>
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The MAA letter also stated that with additional time the regions would have been able to determine the most effective ways to utilize the [support and relief] grant dollars. Given the history and ongoing nature of these grants and grant recipients, one would presume that they already had a pulse on the needs of their stakeholders. Lending support to this presumption
is that some of the regions provided oral and written testimony at the legislature earlier this year as to the specific reasons/needs for their requested funding increase. Actual examples were provided, and it appeared by all accounts that the EMS regions were clear on the needs of their stakeholders.

Fourth Paragraph:

I cannot recall Mark Ebeling ever reaching out to offer the MAA’s assistance. Mark Ebeling, however, did offer to transport EMSRB property (at the time it was being held at a municipal office in the northwest part of the state), to the EMSRB during one of his visits to the metro area. Unfortunately, he never followed through on his offer. I ended up meeting a representative from that municipality to obtain the EMSRB property.

Please note that I have and continue to seek the assistance of members (and those who are employed by member agencies) of the MAA: Kevin Miller, Megan Hartigan, Susan Long, BJ Jungmann, Mike Mondor, Ross Chavez, Jeff Ho, and others, all who have been and continue to be very helpful. I am not certain what offers of assistance are referenced in the MAA letter; nothing specific has been received from the MAA.

I sincerely appreciate the support of the MAA. I also recognize that there exists a “healthy tension” between the MAA and the EMSRB. They represent the interests of its members; we seek what is best for the public’s health and safety. There certainly are times when the execution of our missions is quite closely aligned. Indeed, we have partnered on key projects. There are other times, however, where there has existed a lack of co-mission harmony. Nonetheless, I have endeavored to strengthen the relationship between the EMSRB and the MAA. This letter from the MAA, unfortunately, does not seem to be offered in the spirit of mutual support.

Conclusion:

It is my intent to be aligned with the direction from the Board and professionally carry out the mission of the EMSRB. I would welcome any input or feedback that could help me align with the direction of the Board if I am not doing so currently. I pride myself in leading the EMSRB, especially while we are in transition with staffing, and I am confident I can lead the EMSRB in the future with your guidance and leadership. Thank you.
May 15, 2019

Emergency Medical Services Regulatory Board
Attention: Executive Director Tony Spector
2829 University Ave SE #310
Minneapolis, MN 55414

Dear Executive Director Spector,

The Minnesota Ambulance Association, and its executive committee (MAA), would like to address some concerns regarding the direction of the Emergency Medical Services Regulatory Board (EMSRB). In the past four years, the EMSRB has gone from a staff of five regional EMS Specialists, an Office Coordinator and an Executive Director, to a staff of one Regional EMS Specialist, an Office Coordinator, an Office Administrative Specialist and an Executive Director. The five regional EMS Specialists were very active in performing initial ambulance vehicle inspections and bi-annual ambulance service inspections, in addition to being available for questions regarding regulatory and operational issues. Several ambulance services throughout the state have not had an on-site inspection in over three years and many are operating one, if not multiple, ambulance(s) on the letter from the EMSRB, without ever having their initial inspection completed. Without official inspection, they do not receive the sticker from the state, which is required by Minnesota Administrative Rule 4690.8000.

About two years ago you presented to the MAA and Minnesota Medical Directors Conference, your new vision for the staffing of the EMSRB. However, to date, it appears that the EMSRB remains significantly understaffed.

We are also concerned about the delays in getting grant funding out to the regional programs. The VTR grants were to be out in January of this year, however the regional programs did not receive them until mid-April. Some of the funds requested in those grants were to cover programming that occurred in the first couple of months of the year, leaving regional programs with unnecessary financial hardships. In addition, RFPs for grant dollars are typically rolled out in January, giving regional programs a couple of months to put their proposals together, meet with local boards and determine the most effective ways to utilize these funds. This year, not only did the RFP format change, but a late release and shortened turnaround time placed additional burden on the regional programs and inhibited the vital conversation that is necessary to ensure that funds are used for common local, regional and state emergency medical system needs as identified by those boards. This situation is not in the best interest of the State or Regions.
Mr. Spector, I personally have reached out to you, as have my peers, to offer the MAA’s assistance to you in order to help you make the EMSRB the outstanding Board that EMS services in Minnesota need and our citizens deserve. The MAA is dedicated to making EMS in Minnesota the best and safest in the nation.

Given these examples, the MAA feels that the EMSRB is struggling to uphold its Mission: To protect the public’s health and safety through regulation and support of the EMS system.

The MAA continues to offer our assistance to help the EMSRB in its mission and duty to keep the emergency medical services of the state of Minnesota safe and to be the leader that other states look to for guidance.

Mark Ebeling
President
Minnesota Ambulance Association

Cc: J.B Guiton
    Board Chair
    Emergency Medical Services Regulatory