

STATE EMERGENCY MEDICAL SERVICES COMMITTEE
MINUTES OF SEPTEMBER 23, 1999
Meeting was held in conjunction with Oregon State EMS Conference
DoubleTree Hotel / Jantzen Beach

- MEMBERS:** Pat Hart, T.R. Hilton, Jon Jui, Pete Kingsley, Charles McCart, Helen Miller, William Porter, Suzann Schmele, Richard Straw, Jim Thomas.
- OHD STAFF:** Roger Fox, Raymond Jester, Juanita Moore, Steve Myren, Edward Opitz, Luke Terrell, Donna Wilson.
- ABSENT:** Eric Brunswick, Terry Griffith, Ken Parsons.
- GUESTS:** Shawn Baird, Will Bauscher, David Cook, Scott Cooper, Tim Dahl, Wes Harwood, Paul LeSage, Markley Drake, Ted Farr, Dave Fuller, Jan Glarum, Gregg Lander, Phil Moyer, Mark Stevens, Ron Thomas, Craig Warden.

1. Meeting Called to Order

The meeting was called to order by Dr. Jui, Chair. He introduced guests, and mentioned the “No-Smoking” policy.

M/S/C Accept the June 11, 1999 meeting minutes.

Introduction of New Committee Member

Dr. Jui introduced, and welcomed William Porter, RN, EMT-P, Clinical Manager of AirLife in Bend, Oregon. Mr. Porter was appointed as Julie Moilan’s replacement.

2. Subcommittee & Liaison Section / Discussion Items

B.M.E./EMT Advisory Board Liaison

The BME has not met since the last SEMSC meeting in June. After the last SEMSC the BME’s process in obtaining recommendations for John Whitney’s replacement was discussed. From those conversations, the BME voted to reopen the nominations again to involve more associations and agencies in the process. Suggestions should be forwarded directly to the BME for review.

After discussion, the committee recognized the need to recommend a “street” paramedic from eastern Oregon. Jon Tardiff and Suzann Schmele are currently the only two paramedics with similar background in representation to the BME Advisory Board. Ms. Schmele requested an additional paramedic from the SEMSC join her for the BME meetings. Jim Thomas volunteered to participate.

Subcommittee on Discipline/EMT Education

The subcommittee worked on the proposed rule changes regarding certification/education and disciplinary issues. The following were reviewed: paramedic continuing education language; tone of language; and time frames for reportable requirements for agencies/paramedic incidents (*i.e., layoff/change of address*). Subcommittee recommendations were submitted to Raymond Jester and Edward Opitz.

Dr. Jui requested a time frame by which the test results could be released. Raymond Jester will share more information regarding the paramedic exam in the State EMS Update Newsletter. After poorly written questions are removed, test results will be subdivided by scoring into county or ATAB, depending upon the population of who was tested, and the exam scores. Only the individual paramedic may obtain their test score. Mr. Jester will present a full draft to the SEMSC before a public distribution.

National Curriculum Roll Out Attended by Suzann Schmele, Orlando, Florida

(See the attached report prepared by Ms. Schmele)

Subcommittee Action: *Ms. Schmele will address the NREMT-I curriculum issues with the Education Consortium in October, and present their feedback at the December SEMSC meeting in order to:*

- 1. Keep members of the committee following/tracking the EMT-I curriculum process from a National level;*
- 2. Look at the current Oregon EMT-I requirements, and adopt the NREMT-I standards with as little change as possible; and*
- 3. What is the role of the EMT-I. Are we serving the population?*

Ms. Schmele will contact Robert Wagoner at the National Registry of EMTs to find out further details on involvement with the test bank. Dr. Jui requested a comparison of the Oregon EMT-I to the NREMT-I and how Oregon could come into compliance with these standards. The EMT Consortium will determine the reality of brining this curriculum to the state level, and inform the SEMSC.

System Development and Finance Subcommittee

Administrative Rule Updates

Chairman, Markley Drake reported the subcommittee met for two sessions with the assistance of several persons representing ambulance services, agencies, and ASA plans. This advisory group assisted with the review of three sections of the Administrative Rules. This draft proposal will be circulated to the subcommittee for review, who will in turn submit to the EMSC committee for further discussion on unresolved issues the advisory group could not unanimously decide upon.

Subcommittee Actions: *The proposed draft changes will be presented at the December meeting.*

ASA Plans

The statues in 1997 changed the definition of the ambulance services as it relates to ASA plans. Since 1997 the definition includes non-emergency medical services. This moved the ASA into a franchise service which includes emergency, and non-emergency service. Rhea Kessler will contact us with a legal interpretation and the subcommittee will draft the rules to reflect the legal definition.

Subcommittee Actions: *The ambulance equipment list will be presented, and discussed in December's meeting.*

Stretcher Cars

An economical factor of managed care has forced the issue of using stretcher cars within the state. The committee decided that due to unregulated, non-emergency business, at the county and state level, we may be faced with future economic issues with potential 9-1-1 ambulance patients.

Committee Action: *Dr. Jui called for a raise of hands to vote on looking at the stretcher car issue with no objective in mind except providing appropriate medical care delivery. In order to assist the counties in the ability to regulate a business so it cannot become a franchise or monopoly, the committee voted by the indication of raised hands to propose the Oregon Health Division take the lead, draft guidelines, and an evaluation process to address this issue. Mr. Jester will look at proposed language in the ASA contract section dealing with this issue and report back to the committee.*

Senate Bill 911

Funding generated from SB 911 will become effective, November 1, 1999. The bill will generate \$1.8 million every Biennium distributed as follows: 35% Area Health Education Center (AHEC), 35% Office of Rural Health, 25% Oregon Health Division, 5% Poison Control Center.

Funds for AHEC and Office of Rural Health will go directly to those agencies for distribution based upon need. Although these funds will go directly to them, the EMS office is to play a role in setting priorities.

The Oregon Health Division is committed to using this funding toward implementing a statewide database. This data will assist in setting statewide priorities and in setting minimum standards. The first two-year cycle will be dedicated to hiring two new positions within OHD-EMS to implement an infrastructure, and give overall direction for training and equipment needs in the rural (*population base of 30,000 or more within a ten-mile radius*) areas.

Committee Action: *Dr. Jui requested the committee members go back into their communities and begin accessing area needs. Forward these needs by E-mailed to Juanita Moore (juanita.a.moore@state.or.us) with the priority of high, medium, or low priority, followed by an explanation of why. As proposals are received, Mr. Jester will work in conjunction with the committee to meet these needs.*

EMSC

Craig Warden, MD and Mr. Jester will work with the EMSC subcommittee to emphasize state wide pediatric education and training. Dr. Jui reminded the subcommittee there is grant funding available for rural area enhanced pediatric education and we must move ahead to make use of these funds. The following people committed to participate as the EMSC committee: Helen Miller, Chair; Ted Farr, Lisa Irwin, Pete Kingsley; Charles McCart, and Craig Warden.

Subcommittee Action: *The EMSC will assess state wide equipment and training needs report back to this committee their findings.*

Department of Education Liaison

Dr. Jui reported the Department of Education is currently restructuring and is looking for a liaison to work with this committee. Dr. Jui will report back their findings at the next meeting.

ACEP

No Report.

Disaster Preparedness

See attached Memorandum from Jan Glarum.

Oregon State Ambulance Association Liaison

No Report.

3. OLD BUSINESS

State EMS Committee Roster

Due to a number of vacancies on the committee Mr. Jester reviewed the OAR 682.195 guidelines: State Emergency Medical Services Committee; qualifications, terms, duties and compensation. According to rule the State EMS Committee will consist of:

- (a) Seven physicians (Eric Brunswick, Jon Jui, Charles McCart, Helen Miller)
- (b) Four EMTs (Pat Hart, Suzanne Schmele, Jim Thomas)
- (c) One public ambulance operator (Richard Straw); One volunteer (T.R. Hilton);
One private (Ken Parsons)
- (d) One hospital administrator (Pete Kingsley)
- (e) One nurse with two years EMS experience (William Porter)
- (f) One emergency dispatch center representative (Terry Griffith)
- (g) One community college or licensed career school representative (Open)

The committee determined the need of: three physicians, preferably representing ATAB areas 2 & 5-9; and one EMT-Basic, one EMT-B/I/P from any ATAB area except ATAB 7 (*Currently have three representatives from ATAB 7 area*), and one community college school representative to replace Brian Bay.

Committee Action & Assignments: The following committee members will assist in the recruitment: Pat Hart, ATAB 2 & 9; Pete Kingsley, ATAB 6; Ken Parsons, ATAB 5. All will submit their recommendations to Raymond Jester.

4. NEW BUSINESS

Weapons of Mass Destruction

Dr. Jui distributed a CD entitled "Weapons of Mass Destruction" to all committee members. The city of Portland received a block grant for preparations in the possible event of a biological, or nuclear threat. Dr. Jui requested members of the committee notify him, or the Employment Office of Emergency Management if they do not have a plan in place for their communities. A representative will be invited to address both federal and state levels of this issue at the next meeting.

Committee Action: Between now and the next meeting, look at communication needs, and assess cost needs in each area.

Disaster Medical Assistance Team (DMAT)

Dr. Miller officially reported that at least on paper, Oregon now has a Disaster Medical Assistance Team (DMAT) under the National Disaster Medical System. The DMAT team is established as an independent, nonprofit organization supporting EMS which could be deployed by a Federal disaster.

In an evacuation situation the DMAT team will be placed prior to a disaster, such as a hurricane or flood situation, to assist local hospitals, and nursing homes in the evacuation of the residents. They will set up clinics, and obtain/coordinate resources in a number of disaster relief situations.

***Subcommittee Actions:** Dr. Miller will communicate with existing northwest teams, and work with the National Disaster Medical System to predetermine, and designate medical teams within the state to respond to National/State emergencies. Jon Jui, Jan Glarum, and Helen Miller will meet to further address this issue.*

Clarification of the EMT AAS Degree

Mr. Jester requested clarification of the EMT AAS degree. The intent from this committee is to maintain the AAS degree requirements completed through an accredited college. Ms. Schmele suggested compiling an education list to use as a reference guide/handout to those seeking the recommended courses. This handout would also refer them to colleges that provide credit for prior learning at a minimal fee. Mr. Jester will meet with the EMT Consortium to further discuss this issue.

Future State EMS Committee Meeting Dates

December 10, 1999

March 10, 2000

June 9, 2000

September 8, 2000

December 8, 2000

Meetings will be held at the Portland State Office Building, Room 120, Main Floor, 1:30 p.m.

5. Written Staff Reports Submitted for Committee Review

- a. Director (Raymond Jester)
- b. Trauma System (Lisa Irwin)
- c. EMS Operations (Roger Fox)
- d. EMS Outreach Program (Donna Wilson & Luke Terrell)
- e. Training (Position Currently Not Filled)
- f. Medical Preparedness (Steve Myren)

6. Public Forum & Comment

No Comments

7. Meeting Adjourned

Meeting Minutes Respectfully Submitted by Juanita Moore