

**STATE EMERGENCY MEDICAL SERVICES COMMITTEE**  
**Minutes of December 1, 2000**

**MEMBERS:** Erin Burnham, William Ferguson, Denise Girard, James Giesen, Pat Hart, TR Hilton, Jon Jui, Pete Kingsley, Charles McCart, Helen Miller, Ken Parsons, William Porter, Linda Quackenbush, Suzann Schmele, Richard Straw, Jim Thomas.

**OHD STAFF:** Jerry Andrews, Roger Fox, Russ Harper, Juanita Moore.

**ABSENT:** Eric Brunswick, Terry Griffith.

**GUEST:** Peggy Andrews, Shawn Baird, John Bisenius, Ted Farr, Jan Glarum, Randy Jackson, Gregg Lander, Paul LeSage, Ron Mariani, William Roberts, John Saito, Eric Schult, Mark Stevens, Ken McGinnis, Craig Warden, Dick Wilt, Joe Worley.

**1. Call to Order**

- A) No Smoking Policy
- B) New Member Introduction: William Ferguson, MD, and James Giesen, MD
- C) Acceptance of Agenda
- D) Minutes approved by all

**2. Subcommittee & Liaison Section Reports/Committee Discussion**

- A) Board of Medical Examiners EMT Advisory Board Liaison  
Suzann Schmele reported the BOM will draft OAR language identifying committee make-up and plans to increase the BOM image in the community. The BOM recommended a request from Grande Ronde Hospital regarding the use of EMTs in the ER be worked out locally. The BOM appointed new members to the EMS committee.
- B) Subcommittee on EMT Certification and Discipline  
Suzann Schmele reported the committee met Thursday October 26, 2000. Two individuals were scheduled to appear. Recommendation was made to continue with terms of probation for the one who appeared and move to suspend the one who failed to appear. Four (4) investigative files were reviewed for comment. The committee was provided with a listing of open and closed investigative files for the year 2000, this list is being published in the EMS update with names and EMT numbers omitted. There was discussion regarding publishing the full name and number begin July 2001. The committee recommended the EMS office discuss this with some of the present associations, do consensus building, and give educational training on the positive aspects of publishing this information. Ms. Schmele presented a resolution to the full committee in support of the A.A.S. requirement.
- C) EMT Education: Linda Quackenbush reported distribution for the first round of funding from Senate Bill 911 totaled approximately \$90,206.00. Training consisted of 9 one day workshops covering a variety of topics. Deadline for the

second round is due December 1, 2000. Thank you to Sandy Rhymen and staff for a great job!

- D) System Development, Legislation, and Finance: No report.
- E) EMS for Children: Fred Neis reported a Needs Assessment survey was distributed; to date 200 responses have been received. Plans are being made for a EMSC conference to be held prior to June 1, 2000 or risk losing Federal funding. FREE continuing education units will be available on-line beginning January 1, 2001.
- F) Oregon State Ambulance Association Liaison: Ken Parsons reported revisions to OAR regarding a new fee schedule is driven by increasing Medicare rates. The next meeting will identify specific areas of increase.
- G) Oregon ACEP liaison: no report.

### 3. Old Business

- A) EMT-Intermediate Update: Russ Harper reported the elimination of Intermediate/Paramedic interface beginning with July 2001 classes. A “plug & play” version will be available to schools for Fall 2001.
- B) Membership update: All positions are filled. Many members will be approached to participate on Subcommittees and work groups.
- C) Disaster planning: Jan Glarum reported four subcommittees are wrapping up initial plans for public health, hospitals, and law enforcement first response. The group will have a discussion on public and bio-terrorism issues. The goal is to design and implement a training plan within twelve to twenty-four months in the Portland metropolitan area. We are currently purchasing equipment, protective equipment, pharmaceuticals, and hospital preparation. During the next few months Jon Jui requested committee members write a plan for their community with hopes to access this funding. For further information contact the Office of Emergency Planning.
- D) Oregon Disaster Medical Activation Team (DMAT): For those interested in membership, Federal National Disaster Medical System is trying to get a national disaster team in each state or region. We currently have a team in Seattle, Idaho, and Alaska (level one, federal assistance). Since the last meeting the group has become an Oregon Corporation, 501 (3) (c) for nonprofit. Currently negotiating to establish with the Oregon Health Division so in the event of a disaster we want our volunteers to activate as quickly as possible.

### 4. New Business

Roger Fox, Hearing Office, conducted a public hearing on October 23, 2000 at the Oregon Health Division from 9:00 am – 12:00 pm and 1:00 pm to 2:00 pm. Both sessions were conducted at the Portland State Office Building on the proposed amendments to the administrative rules pertaining to OAR: 200 – Oregon’s Trauma System; 250 – Ambulance Service Licensing; 260 – County Ambulance Service Area Plans; and 265 – Emergency Medical Technicians. Prior to the Public Hearing, the Oregon Health Division received requests from the public to extend the written testimony for an additional forty-five days, set to expire 5:00 pm on December 7, 2000. The following OAR revisions were reviewed based on

thirty-nine written comments public comments submitted to Mr. Fox as of December 29, 2000. Four or more people expressed written concern on the following OAR:

A) OAR Rule Revision Process Extended Public Comment Period:

1) OAR 333-200-0010 (33)

**Discussion:** Trauma System, OAR 333-200 – Concern expressed over the definition of urban “means an incorporated community of 10,000, 20,000 or 50,000.” 50,000 are the original language.

**Motion (Pat Hart):** To identify “urban area” as a population of **50,000** or more in reference to an **“eight (8) minute response time.”**

**Second: (Erin Burnham)**

**Motion Carried**

2) OAR 333-250-0010 (2)

**Discussion:** By striking out the volunteer language, agencies fear all their associated EMTs will be viewed as employees for tax purposes. Define the word employee under the scope of their certification.

**Motion (Jim Thomas):** “Definition of Employee means any paid person acting within the scope of their duties...” Also, strike “or volunteer” and replace with “their duties.”

**Second (Pat Hart)**

**Motion Carried**

3) OAR 333-250-0020 (3) (p) (B)

**Discussion:** Participants of the audience expressed concern with the last sentence regarding the authorization process.

**Motion (Jon Jui):** Strike the last sentence; “The applicant further authorizes the Division to release to any person or entities information which is pertinent to the application.”

**Second (Charles McCart)**

**Motion Carried**

4) OAR 333-250-0040 (1) (b)

**Discussion:** Members of the audience debated the reasons why the Health Division should require agencies to report OR-OSHA violations. An agency in violation would not be able to conduct business if in violation with OR-OSHA. Roger Fox pointed out that one of the suggestions OR-OSHA made was instead of a copy of the final inspection report, the language changed to provide a copy of “letter of corrective action” that the service has submitted to OR-OSHA.

**Motion: (T. R. Hilton):** Eliminate the language: “(b) When a licensee is inspected by Oregon Occupational Safety and Health Division (OR-OSHA), excluding a voluntary inspection, the licensee shall provide the Division a copy of the final report within 14 days of the receipt of the report by the licensee.”

**Second: Ken Parsons**

**Motion Carried**

5) OAR 333-250-0041 (2) (a) (G)

**Discussion:** Since a majority of continuing education has been computerized the group consensus was the instructors are not involved with the rosters. Due to the electronic and computerized processes this language is outdated and should be deleted.

**Motion (Suzann Schmele):** Language is outdated due to electronic world, delete entirely.

**Second (Charles McCart)**

**Motion Carried**

6) OAR 333-250-0042 (2)

**Discussion:** Members of the audience suggested language: "Who may respond on an ambulance" versus "ride on an ambulance." After debating the group decided that insurance carriers regulate this type of situation, or may fall under Professional Standards. Consensus of the group was to delete this entirely.

**Motion (William Ferguson):** Delete entirely.

**Second (T. R. Hilton)**

**Motion Carried**

7) OAR 333-250-0044 (1) (a)

**Discussion:** Discussed what is patient contact.

**Motion (Ken Parsons):** To accept language as is.

**Second (Suzann Schmele)**

**Motion Carried**

8) OAR 333-250-0048 (1) (b)

**Discussion:** The issues raised by the audience discussed the financial impact his issue would have on business operations of EMS agencies. Many agreed that sleep deprivation should be addressed through company policy and procedures. If passed, this will propose financial hardship requiring double or additional staffing.

**Motion (Helen Miller):** Remove language referring to an hourly time period. Delete the sentence: "As a baseline the Division shall expect that an employee must be afforded at least six hours of uninterrupted rest during a 24 hour period of work, although other combinations of work and rest may be reasonable and appropriate." Also, replace the word "volunteer" in all areas marked out.

**Second:** (Charles McCart)

**Motion Carried**

9) OAR 333-255-0060 (5) (c) (B) (D)

**Discussion:** Even with a spare tire and jack the ambulance crew does not have the proper equipment or ability to change the tire. Agencies have policy and contracts with a repair company that deals with mechanical breakdowns.

**Motion (Russ Harper):** "(D) Serviceable spare tire at least 3/32" tread; and (E) Serviceable jack with handle and lug wrench; **or policy and procedure for dealing with a flat tire.**"

**Second (James Thomas)**

**Motion Carried**

**10) OAR 333-260 County Ambulance Service Area Plans**

**Discussion:** The issue of stretcher cars was presented and the group agreed to deal with this issue at another time.

**11) OAR 333-265-0010 (9)**

**Discussion:** The group agreed to retain the degree requirement and keep language as is.

**Motion (Ms. Burnham):** Accept this initiative as written.

**Second (Mr. Giesen)**

**Motion Carried**

**12) OAR 333-265-0060 (3)(e);** change to “ 365 days and up to 12 credits”

**Discussion:** The group conceded the educational institutions did have a set curriculum in place to support this rule.

**Motion (Ms. Burnham):** Amend the language to say: “up to twelve (12) degree hours missing within 365 days of submitting an application.”

**Second (Charles McCart)**

**Motion Carried**

**13) OAR 333-265-0130 (9)(a)(A)**

**Discussion:** Solve two problems. Removing the language which states (1,000 question test” allowing the state the ability to set a reasonable number of questions so that the test cannot be legally challenged for 999 questions; change the EMT-P test from a 200 to a 150 question test; and also do not want to set a particular passing percentage. The questions have not been validated due to cost. The testing process is designed to test the knowledge base of the paramedics, not the skills, which is determined by the physician advisor.

**Motion (William Ferguson):** Leave as written: “(a) Every second recertification cycle (every fourth year), irrespective of the date of initial certification, beginning with the recertification cycle ending June 30, 1999, complete a written core EMT-Paramedic knowledge assessment with **no more than 200 questions and a passing grade that is determined by the Division.** The written knowledge assessment examination shall: (A) Consist of questions drawn from a bank of questions **created by the Division;** which shall be provided to each EMT-Paramedic not later than July 1 of the year preceding the scheduled knowledge assessment.

**Second (Denise Giard)**

**Motion Carried**

**14) OAR 333-265-0160 (1)(a)(G)**

**Discussion:** In order to initiate a timely investigation for unprofessional conduct or criminal involvement, the timeframe should tighten up a bit.

**Motion (Erin Burnham):** Change the language to (A) within fourteen (14) days of occurrence, and (B) within thirty (30) days of occurrence.

**Second (Pat Hart)**

**Motion Carried**

**15) OAR 333-265-0170 (1)**

**Discussion:** General comments reflected it is unreasonable to expect agencies could meet all these requirements. Strike this language and address this

through State Trauma Rule. Ask the Board of Medical Examiners address this issue in their rule revision.

Motion (Charles McCart): Strike the language entirely; not an EMT issue.

Second (William Ferguson)

Motion Carried

**16) OAR 333-265-0170 0033**

Ron Mariani expressed concerns of having hard copy of certificate(s) on file, language is outdated in electronic world.

**OAR 333-255-0070**

Ron Mariani expressed concerns regarding language for ground/marine ambulance license requirements. Suggested language such as “valid unrestricted operators license” should suffice.

For housekeeping purposes he also requested reviewing OAR 265-0140, 250-041, and 265-0150 for the last record keeping mentioned in the previous revisions. Russ Harper committed that the Health Division would pay close attention to his written comment.

**Associate Degree Requirements:** After much discussion, Russ Harper will form a focus group of concerned parties in an attempt to provide clear dialogue. Mr. Harper expressed sincere intent to work with EMTs and employers to get people through the process.

Meeting Adjourned

Minutes respectfully submitted by Juanita Moore