**FLORIDA EMERGENCY MEDICAL SERVICES (EMS) ADVISORY COUNCIL**

**Meeting minutes** from the meeting of:

July 12, 2017

Quarterly Meeting – Orlando, Florida

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| **Member Name:** | **Voting Status:** | **Attendance:** |
| Steve McCoy, EMS Section Administrator | Non-Voting | Present |
| Charles E. Moreland, Ed.D., Chair (Outgoing) | Voting | Present |
| Mac Kemp, EMS Administrator, Chair (Incoming) | Voting | Present |
| Darrel Donatto, EMS Administrator (Fire) | Voting | Present |
| Jamie Greene, EMS Educator | Voting | Present |
| Lew Simon, Lay Elderly | Voting | Present |
| Jane Bedford, Paramedic (Non-Fire) | Voting | Present |
| Ann Brown, Emergency Nurse | Voting | Present |
| Isabel Rodriguez, EMT (Non-Fire) | Voting | Present |
| Danita Allen, Hospital Administrator | Voting | Present |
| Bari Conte, Air Ambulance Operator | Voting | Present |
| Antonio Gandia, M.D., Physician | Voting | Present |
| Nicholas Namias, M.D., Physician | Voting | Present |
| Mark Postma, Commercial Ambulance Operator | Voting | Not Present |
| Kingman Schuldt, EMT (Fire) | Voting | Present |
| Dan Azzariti, Paramedic (Fire) | Voting | Present |
| Linda Liebert-Hall (Lay Person) | Voting | Present |
| Charles Hagan, III, Office of the Governor, Emergency Management | Non-Voting | Not Present |
| James Swearingin, Department of Highway Safety & Motor Vehicles | Non-Voting | Present |
| Vaughn Hendrix, Department of Education | Non-Voting | Not Present |
| Trenda McPherson, Department of Transportation | Non-Voting | Not Present |
| Carlton Wells, Department of Management Services | Non-Voting | Present |
| Joe Nelson, D.O., State EMS Medical Director | Non-Voting | Present |
| Julie Bacon, EMSC Liaison | Non-Voting | Present |
| **Public Speakers:** | | |
| Chief Julie Downey, Co-Chair Disaster Response Committee | | |
| Brent Williams, FirstNet | | |
| Chief Greg Rubin, FloridaNet | | |
| Brad Elias, MD, Department of Health, Domestic Security Coordinating Group | | |
| Chris Cebellero, Cebellero & Associates | | |
| Mike Hall, Nature Coast EMS | | |
| John Peterson, Sunstar Paramedics | | |
| David Summers, Co-Chair PIER Committee | | |

**Call to Order**

A call to order was conducted at 9:05 a.m., the pledge of allegiance was led by Isabel Rodriguez and a roll call was taken. A total of fifteen voting members were present; therefore, a quorum was met. The minutes from the October 20, 2016 Advisory Council meeting minutes were approved as submitted.

**EMS Section Report**

Steve McCoy recognized the 2017 EMS Award recipients and thanked everyone in the EMS Section who worked hard to make the award ceremony a success. He welcomed the new council members and stated he was pleased that this was the first time in several years that there was a full council of voting members. Mr. McCoy reported that the Department has signed a state-wide cardiac cares registry, CARES, with Emory University. He advised that the state CARES coordinator is Joe Ferrara and he will be assisting to bring agencies onboard to the registry. Mr. McCoy stated that another initiative the Department is working on is the National Collaborative for Bio-Preparedness. He explained that this agreement with the University of North Carolina Chapel Hill will provide the Department a pre-hospital bio-surveillance platform. The platform was presented originally to the Data Committee and the Department will be working on its implementation over the next several months. Mr. McCoy stated that this tool would help the Department make sure the requirements of House Bill 249, which passed at the recent legislative session, are met; getting drug overdose information back to EMS agencies, law enforcement, and public health officials in 120 hours. He informed the audience that this tool would enable the Department to give data back and that they will be working to make sure everyone’s needs and concerns are addressed.

Dr. Joe Nelson asked if the tool gave feedback on things other than just bio-terrorist and bio-preparedness issues.

Mr. McCoy agreed that this tool is not just for overdoses and the other standard bio-preparedness scenarios. He reported that they are working on putting performance compass measures in the system so people can see they compare. He stated the goal is to work with the committees and make sure it fits our needs and what we want to do in the State of Florida. He reported that the large rule reduction package the council has been working on over the last three years was split into two phases. This council voted on phase one of the rule package at the April 2017 council meeting and a notice of proposed rules was released on June 29th stating this is the actual language of the rules. Once the waiting period closes, the package the Department will file for adoption with the Department of State and it will go in front of the Joint Administrative Procedures Committee. Mr. McCoy advised the Notice of Rule Development was filed on the second phase of the rule package a month ago. He stated that this rule package is more specific towards EMS agencies and that the rules include a section that references the General Services Administration (GSA) and how ambulances must meet the most recent recommendations. He reported that the matter of how EMS agencies will be able to meet the requirements of the notices coming from the GSA has been discussed for several years. In this rule package, there are ambulance specifications that are as comprehensive as that the of the Federal Ambulance Specification KKK-A-1822. Mr. McCoy stated that during this council meeting he has been speaking with different groups and committees for some guidance on doing a last-minute audit to the rule packet to include a cache Ground Vehicle Standard (GVS) standard and the National Fire Protection Association (NFPA) 1970 standard. He further communicated that the department has changed its standards on issuing Advanced Life Support (ALS) and Basic Life Support (BLS) permits and the new standard will allow an EMS agency who cannot meet the requirements to respond as an ALS unit will be able to respond as a BLS unit instead of no response at all.

**Medical Director’s Report**

Dr. Joe Nelson reported that the Federal statute, House Resolution Protective Patient Access to Emergency Medication Act H.R. 304, that relates to EMS was passed by the U.S. House in the January 2017. He stated that is has now been sent to the Senate, assigned to Senate Bill 916 and assigned to the U.S. Senate Legislative calendar. Dr. Nelson advised that it is anticipated that there will be a vote on this bill by the end of the federal legislative session however, it has not been taken up yet, due to other higher priority work that Congress is doing. He informed the audience that this law specifically addresses how the Drug Enforcement Agency (DEA) will create rules for EMS agencies on the handling of medications and controlled substances. Dr. Nelson further explained that the bill deals with DEA licenses; and defines the responsibilities of the medical director and the EMS agency. The medical directors are in support of the bill and hope that it passes during this session. He stated that medical directors would also like to voice their support of the state’s participation in the CARES registry. Dr. Nelson reported that the Federal Drug Administration (FDA) has extended the expiration dates on four emergency medications; Sodium Bicarbonate, 50 percent Dextrose, Epinephrine, and Atropine. He confirmed with Mr. McCoy that we are currently waiting on the Florida Department of Business and Professional Regulation (DBPR) to approve this extension for use by Florida EMS agencies. The medical directors are in support of the extension for a period of six months and feel there will be no negative clinical impact from the extension. Dr. Nelson advised that the medical directors discussed the new federal recommendations for personal protective equipment for first responders when dealing with Carfentanil and other potent opioids. He stated that the recommendation says that in most cases standard personal protective equipment will suffice when dealing with these substances however, in certain circumstances additional respiratory protection may be needed. Dr. Nelson reported that Doctor Paul Pepe, gave an update to the medical directors on the latest cutting-edge cardiopulmonary resuscitation (CPR) techniques that are being researched, which includes the idea of putting the patient's head in an upright position of about 30 degrees and how this shows an improvement of blood flow to the brain during CPR. He informed the audience that this has only been done in a laboratory study at this point but that the results are very dramatic. Dr. Nelson announced that if these techniques turn out to be more affective, then the EMS community and others will be looking at significant changes in the way they perform CPR. He advised that Dr. Ken Scheppke, gave an overview of the research presentation from the Gathering of Eagles meeting in Dallas, Texas and presented information on an innovative treatment program that Palm Beach County Fire Rescue and others have undertaken for drug overdose patients. This program includes the use of community paramedics to begin long-term treatment of drug overdose patients once they have had the emergency resolved in an emergency department, using a medication called Suboxone. Dr. Nelson reported that this treatment program is still in the beta testing stage, but the results have been impressive. To clarify the success rate, he advised that in the standard drug treatment program for narcotic overdose there is about a 5 to 10 percent success rate for a long-term success in keeping the addict from going back to narcotic abuse. For the 50 patients in the program in Palm Beach County for the past year, they have had a 78 percent success rate in preventing addicts from going back to using narcotics.

**Trauma Director’s Report**

Dr. Nicholas Namias reported that the designation and apportionment of trauma centers remains an issue in Florida, with multiple systems remaining in litigation. But in the meanwhile, EMS has more trauma center destinations to go to than ever, which may be a good thing or bad thing, depending on where you are. He stated the Committee on Trauma met and that Florida trauma centers now have a state-wide basic trauma quality proof of program collaborative. Dr. Namias advised that the committee is working with the National Committee on Trauma to develop the program into a more sophisticated tool than they have now and as opportunities present themselves he will present them to the Advisory Council to see where EMS can help improve outcomes for trauma patients.

**Committee Member Reports**

Dr. Moreland opened the floor for council committee member reports.

Jamie Greene reported that at the EMS Educators' meeting it was announced that, after several years of discussion, a scholarship program for EMT and paramedic students will be rolled out over the next month or two.

Bari Conte advised that her term with Florida Aeromedical Association (FAMA) is over and that Diane Fojt, who was previously Vice President, will now serve as President. Chad McIntyre is the new Vice President. She also reported that they have added a new component to the FAMA board to include all aspects of service which include ground, critical care and neo-pedi. Ms. Conte stated FAMA will be provide a training in January 2018 which will insure there are personnel available with appropriate training in the area if there ever is an environmental disaster incident or accident. Once more information on the training becomes available they will get it sent to the state.

Chief Darrel Donato reported that the Florida Fire Chiefs’ Association has worked hard on the balance billing issue. He reminded the audience that most EMS services in the State of Florida are provided by a government service provider and the Fire Chief's Association has worked hard to improve funding and protect funding for EMS providers. They have prevented legislation going through that would have removed some of that funding and are still working actively on that issue. Chief Donatto stated that on the plus side, they have been able to bring in over $50 million the past few years to government agencies who have provided EMS care to the medically indigent population. He encouraged agencies that are not currently participating in the program to reach out to the Fire Chiefs’ Association to get connected with the program. Chief Donatto shared the chiefs’ support of H.R. 304 but stated they are in opposition of Senate Bill 967. He stated this Bill is intended to extend Medicare ambulance payments and increase funding at the reimbursement level. However, there is parts of that Bill that Florida Fire Chiefs Association along with the International Association of Fire Chiefs, the International Association of Firefighters, and most state Fire Chiefs' Association are opposed to which regards a move from supplier to provider for EMS agencies. Chief Donatto reported that they are working with the legislators at the federal level to replace this current Bill with a bill that provides for the ambulance payments, considers costs of reporting methodologies, but does not make the supplier to provider move.

Mac Kemp advised that the Florida Council of EMS Chiefs met and would like to make a recommendation to the council regarding current issues of drug shortages in several areas. They would like the council to consider re-initiating the drug shortage committee. Mr. Kemp notified the council he had already talked briefly with Cory Richter about this, due to Cory leading this charge last time, and that he said he would be available if needed for this task. Mr. Kemp stated that he believes it would be nice to get a report back to the council on the drug shortage issue so they can try and stay ahead of the issue and provide as much information to all the EMS systems in Florida regarding alternatives.

Dr. Moreland agreed that is an important issue and something that Mac Kemp and the new council will be able to address. He stated that Cory and the team did a great job when the issue came up a few years ago and that it would be good to get a report and clear consistent messaging out to all EMS providers throughout the State of Florida on what they can and cannot do so they do not get in trouble with any type of governmental entity.

Dr. Moreland announced that it was time for him to leave the council. He thanked everyone currently on the council, as well past members he has worked with over the years and that there were several people present who he had a lot of respect for and who were inspiring to him. Dr. Moreland stated he has grown as an individual, as a professional, as a leader within his city and throughout the state and he just wanted to thank everyone for being a part of that. He shared with the audience that he feels that leadership is important and that everyone present can grow, lead and be a good example. Dr. Moreland encouraged everyone to go back to their agencies and identify individuals who are ready to step up into a leadership role and get them working with one of the council’s committees so they can be ready to work on the council in the future. He also encouraged the current council members to make sure they make their voices heard and work as a team. Dr. Moreland passed the gavel to Mac Kemp and told him he looks forward to his continued leadership to make the Council even better. He stated that Mr. Kemp has a lot of good people ready to work and ready to get it done for the men and women who serve and protect our cities and our state every single day. Mr. Kemp thanked Doctor Moreland for his leadership, his vision and commitment to EMS through his work on the council and throughout the state. Dr. Moreland retired from the council table at this time.

Mr. Kemp stated that he would like to begin that he has been guided by two principals throughout his EMS career and that he wants to guide the council the same way. He advised the first principal pertains to if what is being done is good for patient care and wants the council to keep in mind that what they do needs to lead to better care for the citizens of and visitors to the Florida. Mr. Kemp explained the second principal, which follows very closely to the first, is that what the council does is good for EMT’s and paramedics that work in the state because they are the ones that provide the care. He believes the council should make things easier and better for them to provide the best care possible in Florida. He stated those will be the two litmus tests he is going to ask each time something comes to the council as each of these issues are very important. Mr. Kemp requested the council members to remember that they are there to represent all the EMS community not just their individual constituency groups. He stated that he wants the council to approach issues in a collaborative manner and for every council member to not only use their voices to share their opinions but to also be active listeners. Additionally, Mr. Kemp advised that he expects everyone to be respected and respectful.

**Old Business**

Strategic Plan Update

Mr. Kemp requested that the council members take out their copies of the strategic plan so the amendments being requested could be discussed. He reminded the council that this plan will lead the direction of the council and EMS in the state for the next few years. Mr. Kemp asked that each person presenting an amendment read the current language, clearly state the amendment and state it in the form of a motion. He stated after this the floor would be opened for a second, a discussion and a vote; and that the amendments would be handled one at a time in this manner.

Bari Conte began by requesting a motion, on behalf of the Medical Care Committee, to add the word “all” in front of “non-traumatic cardiac arrest” in Goal 2.2A page 4. Dr. Nelson, seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Ms. Conte requested a motion to make another change to this goal by changing the measurement to read from “16% to 20%”, to read from “7% to 20 %” who receive Cardiac Bystander CPR. Dr. Gandia seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Ms. Conte’s third motion was to change the time for Goal 2.2C on page 4 to 20 minutes and the measurement to 90%. Ms. Rodriguez seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Ms. Conte made a motion to change the time to 20 minutes for Goal 2.2E on page 5. Ms. Bedford seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Ms. Conte made a motion to change the wording of Goal 2.2F on page 5 from “primary or comprehensive stroke center” to “state stroke facility”. Ms. Brown seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Ms. Conte made a motion to change the time for Goal 2.2G on page 5 to 20 minutes. Dr. Gandia seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Ms. Conte’s last motion was to change the measurement to 90% for Goal 2.2H on page 5. Ms. Brown seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. Chief Donatto asked for clarification, under formality, that if they are changing the number, for example changing the number of response minutes, then the to/from is no longer valid. Mr. Kemp stated that this is his understanding. With no further discussion, this motion passed unanimously.

Mr. Kemp asked the council if there were any further amendments.

Ms. Brown made a motion, on behalf of the Education Committee, to change the objective of Goal 3.1(c) on page 5 to increase the gender diversity of EMTs and paramedics in the workforce by 5% over the next two years until we meet or exceed the national average of 20%. Ms. Rodriguez seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Ms. Brown made a motion to add a new strategy, numbering it 3.1.3. She stated this that strategy is to adopt, implement and meet or exceed two components of the NEXIS EMS education agenda for the future by December 31st of 2020. The first is National EMS accreditation and the second is National EMS testing. Ms. Brown advised that there are two objectives for this strategy. Objective one is for all initial EMS training programs in the state of Florida to achieve national accreditation by December 31st of 2020. Objective two will be to institute national EMS testing for initial certification by December 31st of 2020. Ms. Rodriguez seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. Chief Donatto stated that after reading the wording of this addition, he had some concerns about the national certification aspect of this strategy and how it would affect EMS personnel to continually gain national certification. After some discussion, Ms. Brown changed the motion to have the wording of the strategy read: Adopt by December 31st, 2020 National EMS education program accreditation and national EMS testing for initial certification only and the wording of the objectives remain the same. Dr. Gandia advised he had a concern about the time frame for national accreditation of the education programs due to how long it takes these programs to get approved and whether institutions would be able to meet the 2020 deadline. Ms. Brown confirmed that the only accreditation the National Registry of Emergency Medical Technicians (NREMT) recognizes is from the Commission on Accreditation of Allied Health Education Programs (CAAHEP). Following an extensive conversation, Dr. Nelson suggested changing the deadline to 2026 to allow sufficient time for paramedic institutions to achieve national certification. Ms. Brown asked for clarification if a deadline could extend beyond the date of the State Plan which ends in 2021. Mr. McCoy informed the council that it would not be an issue and that this strategy could even be written as a percentage requirement. He also stated that the state would be there to support these programs achieve this goal. Dr. Nelson advised the council that there are new requirements from the CAAHEP that requires these programs to have institutional accreditation before they can receive national accreditation and that this would affect how long it takes a program to achieve national accreditation. Dr. Gandia expressed a concern about any new programs that may start in later years of this strategy and setting a deadline of 2026 when it takes so long for a program to receive national accreditation. Ms. Brown indicated that the issue trying to be addressed with this strategy is the that Florida is one of the last three states in the country not using national accreditation and that there needs to be a mechanism in place to address the issue. She stated that new programs would start out knowing that national accreditation is a part of their requirements for a program in Florida. Mr. Kemp reminded the council that they are not creating legislation and are working on goals and objectives for state EMS. He stated that sometimes every goal or objective is not met, so the council is trying to make progress in the right direction. Mr. Greene stated that the educators were told that they would be required to start national exams for initial applicants this year and that they have invested a lot of effort, time and money to meet this requirement. He expressed a concern that whatever the council decides it needs to definitive and not drawn out. Ms. Brown stated that it these are goals and that they sometimes need adjustments and it would be ideal to have an achievable goal. After something further discussion, it was determined to go from setting the strategy with a set year to a percentage. Ms. Brown asked for some time to work with Ms. Bedford and Mr. Greene to make sure the educators were represented in the rewriting of the strategy. Mr. Kemp agreed that the council would come back to this strategy.

Mr. Kemp asked the council if there were any other amendments to be discussed.

Ms. Bacon asked the council to refer to Goal 5.4(a) on page 7 regarding reducing the number of pediatric low acuity emergency department (ED) visits. She explained that this objective was originally assigned to the Access to Care Committee, however the EMS for Children (EMSC) agreed to review it and had their first robust conversation about it at this council meeting. Ms. Bacon stated that it is the recommendation of the EMSC that this objective be removed from the state plan. She advised that the first reason is the majority of low acuity ED visits come in via a private vehicle which are outside the purview of the EMS. The second reason is because the committee is concerned about the message this objective sends and if the council is recommending that they divert patients somewhere else. Ms. Bacon informed the council that with this in mine, it is the recommendation that this objective be removed for now and possibly revisit it when the current Goal 5.4(b) regarding the adult lower acuity visits becomes more defined template. Mr. Kemp made a motion to accept this proposed removal of the current Goal 5.4(a). Ms. Bedford seconded this motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously.

Mr. Wells asked that the council refer to Goal 3.1.2(b) on page 5, in particular the asterisk regarding FirstNet. He discussed how this line is written currently; which is where the state is now, the request for proposal stage, and where we will be with FirstNet at the end of the year, which will be the opt-in/opt-out phase. Mr. Wells asked the council if they wanted to discuss whether they wanted to keep changing this asterisk statement or remove it altogether. Mr. Swearingin made a motion to remove the asterisk statement from Goal 3.1.2(b). Mr. asked if there was second to the motion. Chief Donatto seconded the motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously.

Mr. Kemp asked the council if there were any other amendments to be discussed.

Chief Schuldt stated that the Disaster Response Committee would like to request a couple of changes and that his co-chair, Chief Julie Downey, would present the proposals. Chief Downey advised that the first change the committee is requesting is to change the date from December 31, 2017 to December 31, 2018 and increase the percentage from 23% to 33% for Goal 4.1(a). Chief Schuldt made a motion to make this change to the state plan. Mr. Kemp asked there was a second. Mr. Greene seconded the motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Chief Downey stated the second change the committee would like to request is to Goal 4.1(b) by changing the year from December 2017 to December 2018 and the percentage from 45% to 55%. Chief Schuldt made a motion to make these proposed changes to the plan. Mr. Kemp asked if there was second. Lew Simon seconded the motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Chief Downey stated that the committee would like to request that the date for Goal 4.1(c) be changed to January 2018 and the word “armed” be added in front of “EMS providers”. Chief Schuldt made a motion that this change be made to the state plan. Mr. Kemp asked if there was second. Ms. Bedford seconded the motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Chief Downey reported that there were two more additions from the last strategical plan that needed to be included in these amendments. The first would be for Goal 4.1(d) changing the date to December 31st, 2018 and increasing the percentage to 58 percent. Chief Schuldt made a motion to make this change to the plan. Mr. Kemp asked if there was second. Ms. Brown seconded the motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Chief Downey stated the last change would be to Goal 4.1(e) by changing the date to December 2018 and the percentage to 44 percent. Chief Schuldt made a motion to make this change to the plan. Mr. Kemp asked if there was second. Mr. Simon seconded the motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously.

Chief Donatto asked if active shooter goals be a higher priority, all things considered. Chief Downey stated that she agreed but that the committee went with a 10% increase for the year as an attainable goal. A lengthy discussion ensued regarding the merits of increasing the percentage of EMS providers equipped to manage an active shooter in the goal. After the discussion, Chief Scheldt’s amended his motion to change Goal 4.1(e) changing the date to December 2019 and the percentage to 75 percent. Mr. Kemp asked if there was a second to the motion. Dr. Gandia seconded the motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, Mr. Kemp called for a vote. This motion passed with one nay vote. Chief Schuldt also made a motion to change Goal 4.1(d) to the new date of December 2019 and increase the percentage to 75 percent to align with the new goals in Goal 4.1(e). Mr. Kemp asked for a second. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously.

Mr. Kemp asked the council if there were any other amendments.

Ms. Brown made a motion to approve a new Strategy 3.1.3 that reads: Achieve national EMS education program accreditation for initial paramedic training programs and adopt national EMS testing for initial certification only. She advised that the objectives would remain the same as stated earlier in the meeting with the exception of the year for objective one being 2020 and the year for objective two being 2023. Mr. Kemp asked if there was a second to the motion. Ms. Conte seconded the motion. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. Dr. Namias asked if Ms. Brown would read the strategy again and clarify information on the initial certification. With no further discussion, Mr. Kemp called for a vote. This motion passed with one nay vote.

Mr. Kemp asked if there were any further amendments. Seeing no further amendments, he asked for a motion to accept the 2016 – 2021 Emergency Medical Services State Plan as amended. Ms. Brown made a motion to accept the plan as amended. Mr. Kemp asked if there was a second. Mr. Kemp stated there was a second to the motion and asked if there was any discussion. With no discussion, this motion passed unanimously. Mr. Kemp asked Mr. McCoy to get the plan to everyone once it is available with all the changes.

**New Business**

Mr. Kemp welcomed the new members to the council. He asked that each of them introduce themselves and share with everyone a little about themselves. The following new members introduced themselves: Jamie Greene, Lew Simon, Linda Liebert-Hall, Dr. Antonio Gandia and Chief Dan Azzariti. Mr. Kemp stated that he was very happy to welcome them all to the council and that everyone appreciates them sharing their expertise and different points of view.

Mr. Kemp stated that he would like the members to consider reappointing the drug shortage committee and asked for feedback from the council. Chief Donatto stated that he knows Dave Dyal the Fire Chief in Stuart Fire Rescue was running that with Corey and that even though he has not spoken to Dave he thinks he would tremendous asset on that issue. Mr. McCoy advised that the state feels that this is a very important issue and will support the committee in any way they can.

Mr. Kemp advised the council and audience that there would now be a presentation on FirstNet from Brent Williams. Mr. Williams began by giving everyone a little history on FirstNet. He explained that the First Responder Network Authority (FirstNet) is a nationwide broadband network dedicated to public safety. And that this network will enable public safety users’ enhanced communications’ capabilities, enabling them to respond more quickly and effectively to emergencies. Mr. Williams further explained that this came about from many years of the public safety sector working together to lobby Congress for the creation of this nationwide network. He advised that FirstNet is an independent authority within the U.S. Department of Commerce and it is their responsibility to build the network. Mr. Williams explained that no tax payer dollars are going to pay for this network as it is being paid for with money from spectrum sales. He also advised the audience that FirstNet has contracted with AT&T to deploy and maintain the network for the next 25 years. Mr. Williams explained that AT&T offered full priority and preemption across the entire network infrastructure. He further explained that what this does for emergency personnel is that if a cell site extremely busy, preemption says the general public gets off the lines so emergency personnel can use them. Mr. Williams stated that it will be up to the individual states to determine whether they want to opt-in and have FirstNet build a network for them or opt-out and build their own network which will still have the ability to interface with the national network.

Mr. Rubin introduced himself as the statewide EMS representative for FloridaNet. He explained that FloridaNet is the group that was formed to represent the various disciplines within the state of Florida and determine a recommendation to make to the governor regarding whether the state should elect to move forward with the move to the FirstNet plan of AT&T or choose to build our own plan. Mr. Rubin advised that this includes planning, funding, deploying, building and contracting with someone. He stated that the Department of Management Services (DMS) is chairing the FloridaNet Committee and currently they do not have an alternative to FirstNet plan. Mr. Rubin advised that he will be working with Mr. Williams to address the concerns FloridaNet has about certain coverage gaps in Florida.

Mr. Kemp asked there were any questions for Mr. Williams and Mr. Rubin.

Dr. Nelson said that he would like to make comment, as an ex-officio member of the FloridaNet Board, that he thinks everyone needs to appreciate the potential of the FirstNet system. He explained that this system will allow ambulances and rescue rigs to send images in real-time to a physician to be interpreted.

Ms. Conte asked how FirstNet will affect EMS working in the air industry and if they will be able to utilize this tool.

Mr. Williams indicated that EMS air providers will be able to use the FirstNet network. He stated that the FCC rules that typically apply to cell phone technology in the air will not apply because FirstNet is licensed under public safety licensing rules. Mr. Williams reported that they have people working on technical issues that apply specifically for EMS air personnel.

Ms. Conte asked if this included covering areas such as the Everglades which currently have no service when they are flying over these areas.

Mr. Rubin informed the council that Miami Dade Fire Rescue is currently testing those capabilities now.

Dr. Namias asked if that ensures that in-hospital and intra-physician communication, which is not EMS, does not get bounced off the network during an event.

Mr. Williams reported that FirstNet understands the importance of this relationship and of that with their EMS personnel; as such he stated there will not be any issues in this area.

Mr. Rubin stated that this is something they have also discussed at FloridaNet. He advised that one of the things that they are asking for is that local entities have the ability to temporary change the priority access of their users during a local incident.

Mr. Kemp thanked Mr. Williams and Mr. Rubin for coming and for their presentation.

**Committee Reports**

Disaster Response Committee:

Chief Downey reported that the Disaster Committee received an update from Doctor Elias on the state medical response system. She stated that he advised that Florida International University (FIU) will be assisting with that system and the Department of Health (DOH) personnel will maintain the logistics and equipment. Chief Downey advised that Dr. Elias also told the committee that DOH has $250,000 worth of MCI bags that will be distributed to county health departments and government buildings but the plans for how they will be distributed are still in the works. She informed the council that Bobby Bailey gave an update to the committee on the ambulance deployment plan which will now include neonates and pediatrics. Chief Downey stated that Terry Shrink gave an update on how highly infectious patients will be transferred from their initial location to Emory and how these patients can be passed off from region to region to reach Emory. She reported that there is a plan in place to do a full-scale exercise in February 2018 to test the system from South Florida to Emory. Chief Downey advised the council that the committee discussed the stop-the-bleed program and that Johnson & Johnson is going to be coming out with a full-scale public service announcement (PSA) very shortly on this program. She stated in her area they have used a grant from the Bureau of EMS to make 400 stop-the-bleed kits that will be placed in places like Walmart and Home Depot near the AED’s so they are easily accessible to everyone. Chief Downey stated there is a lot of support for these programs and encouraged everyone to include stop-the- bleed training as part of their CPR classes. She advised that the committee discussed NFPA 3000 the Standard for Preparedness and Response to Active Shooter and/or Hostile Events and they have several representatives from different agencies that will be following the guidance of the NFPA 3000 and working on a plan for Florida. Chief Downey reported that the committee now has a defined membership of 10 core members on the Disaster Committee and that they will be doing a lot more communication with those people. She advised that draft bylaws for the committee were passed around during the meeting for review and they hope to vote on them at the next meeting.

Access to Care Committee:

Ms. Bedford reported that the Access to Care Committee held a community paramedic workshop on Monday of this meeting, that the designated membership has met twice via conference call since April, and is immersed in the work to meet their goals. She stated that they have submitted draft bylaws to the state. Ms. Bedford thanked everyone who assisted in getting participants involved in the community paramedic workshop because Florida is ranked 52 or 53 of the states and territories on readmissions. She advised that one of the solutions presented to reducing the admissions is increasing the number of community paramedic programs in the state and that a list of resources to assist with these programs is going to be available on the EMSAC website under Access to Care. Ms. Bedford reported that Chief Hughes from Satellite Beach Fire Rescue presented information on the community paramedic program in his area and how they have been able to meet the Institute of Healthcare, Improvement Triple Aim goals. She advised these goals are to improve the patient experience of care, improve the health of the population, and reduce the per capita cost of healthcare. Ms. Bedford informed the council that Melissa McNally presented for Dr. McGraw from Seminole State College information on the preservation on their online CP education. She stated that their final presenter was Michael Collins who shared with the committee a capstone presentation on implementing a CP program. Ms. Bedford advised that the committee is working on a workshop for October, or in the near future, on Pathways to Funding and Sustainability for Community Paramedic and Mobile Integrated Healthcare Programs. She reported that the committee did not have a chance to work on Strategy 5.2 to increase cardiovascular health but the Medical Care Committee will be working on it for the state along with their STEMI and STROKE initiatives. Ms. Bedford reminded everyone that there are education funding opportunities still available through FAREMS and to contact Marcie Heatherington to apply.

Data Committee:

Chief Donatto reported that the Data Committee discussed their bylaws and strengthened their membership. He stated that they have a white paper that is being produced to help outline the security, confidentiality and protection of data submitted to the state to help agencies who have not yet come on fully understand how that data is protected. Chief Donatto advised that the committee also discussed their state plan measures and goals; as well they reviewed some of the extended definitions for the National Emergency Medical Services Information System (NEMSIS) dataset. He informed the council that the committee had a presentation by the National Collaboration for Biopreparedness on bio and geospatial information. Chief Donatto stated that the state is working with them to make the state’s EMSTAR data more actionable and will work to make sure everybody is comfortable with how that data is being used, how their data is being protected, and how best to get information out of the EMSTAR system back to end users.

Education Committee:

Ms. Bedford advised that she would be reading Ann Brown's report from the Education Committee. The report stated that Ms. Brown would like to thank those cycling off the council for all they helped the council accomplish and in particular Dr. Moreland and Daniel Griffin. She stated she would also like to welcome the council members and is excited to see what they will accomplish in the future. Ms. Brown’s report advised that in addition to the three recommended changes to all three of the committee’s objectives that were approved during this meeting, the committee is recommending a new objective to the Council for consideration. Her report stated the committee feels strongly that the EMS Education Agenda for the Future should be addressed without the state plan and that the council as a group should be working to accomplish those goals that have been established to guide the direction of the EMS education.

EMS Communications Committee:

Mr. Wells reported that the EMS Communications Committee met and discussed FirstNet. He advised the Florida's FirstNet data collection project is on its third round of workshops and that there are several workshops scheduled with one per region from July through August of this year. He shared with the council and the audience information on two handouts he gave to the council prior to the start of the meeting. The first one was entitled FirstNet and Emergency Medical Services and it addresses the broadband reliability built in, the interoperable connectivity, complimenting radio networks and bringing your own devices. It also shows where FirstNet recently partnered with AT&T to provide mission critical applications, administration applications, secured connectivity and device management. He advised if anyone in the audience would like a copy of this handout they could contact him via email at Carlton.Wells@DMSmyflorida.com or go to FirstNet.gov/EMS. Mr. Wells stated the second handout was the Match Certification Form and asked that everyone consider filling out this form and follow the instructions on how to get it to Sarah Mashburn. He advised that this form is to help the state with its percent Match Grant from the National Telecommunications and Information Administration (NTIA) to help meet that match. Mr. Wells stated the committee discussed the makeup of the committee's core representatives and the expectation for each core representative to attend other committee or associations related to their core representative status to be able to cross-pollinate between two different groups and engage the core representatives with other committees.

EMS for Children Committee:

Ms. Bacon stated it was a pleasure to present on behalf of EMS for Children Committee (EMSC) the EMS for Children's Hero’s award to Jane Bedford at the award ceremony the previous night. She reported that EMSC Data initiative of providing pediatric pain distraction kits, a kit that provides tools so EMS personnel can address a child’s discomfort in a non-pharmaceutical manner, had several agencies and centers reach out to them. Ms. Bacon advised that the committee raised the funding for the initiative in the early part of July and that they should be reaching out to those who have already signed up soon. She stated if there some EMS personnel still interested in being part of that, which is receiving some kits, education, and giving some feedback, since these have not been specifically used in an EMS setting to please email Bonnie Anderson, Melia Jenkins and herself for more information. Ms. Bacon reported that the committee worked primarily in their meeting on their two objectives from the state plan and are looking forward to the results of the state survey to know where there are gaps. She advised that there are three new initiatives from EMS for Children federal program, which is where the committee receives its annual funding from, that will also be addressed by the committee. Ms. Bacon informed the council the first is a data initiative in which they would like to see the state 80% NEMSIS compliant by 2021. She stated she believes the Data Committee is following up on this one and the EMSC is appreciative of that. She advised that the second and third initiative everyone will see on the state survey and wanted to thank everyone in advance for completing the survey. Ms. Bacon reported to the council these questions are going to be talking about looking at their agencies as far as having a pediatric champion and how we assess competency on pediatric equipment in our agencies. Ms. Bacon stated the committee has a lot of ideas but they need to assess where there are gaps before they can decide how to fill them.

EMS Strategic Visions Committee:

Cory Richter reported that EMS Strategic Visions Committee will be working on a plan to ensure that they receive committee reports by the pre-council meeting from every group that needs to report at the council meetings. He indicated without these reports, it does not show the progress the council is making on the state plan. Mr. Richter stated it is very important the strategic visions committee receives these reports and encouraged each of the liaisons to submit them in a timely manner.

Mr. Richter added that he would be happy to take on the drug shortage committee and feels certain that Dave Dyal would be happy to help him with the committee as he was instrumental with that group before. He stated that if there was anyone else that would like to be on that group to just let him know. Mr. Richter agreed with Mr. Kemp that the state needs to be proactive in this area and he hopes this committee can get on top of the issue.

Mr. Kemp stated that reporting is very important and that there will be follow-up to ensure the reports are being completed. He asked that if any of the groups have an assignment in the plan that they feel like they are not going to be able to achieve or report on, to let the strategic visions committee know, and they will work on that to try to figure it out.

Legislative Committee:

Mr. Kemp advised that the Legislative Committee discussed legislation that passed at the last session and had a short presentation on legislative terminology to understand how the legislature functions. He stated if anyone would like a copy of the presentation they could see him for a copy or contact Steve or Beth at the DOH office. Mr. Kemp reminded everyone that the Florida legislature will meet early in 2018, starting in January instead of March. He informed the council if they have ideas or thoughts for legislation, now is the time to contact their legislator.

Medical Care Committee:

Dr. Nelson reported that the Medical Care Committee discussed their state plan measures which the council has already heard and voted on during this meeting. He stated that Dr. Gandia agreed to co-lead the STEMI work group with Lenora Leddy. Dr. Nelson advised that due to Dr. Namias’ obligations as Chair of the Committee on Trauma for the next five or six years, has requested to move into more of a participant role with the trauma work group and out of the leadership role. As such, Dr. Patricia Byers has volunteered and been appointed as the leader of the trauma work group under the Medical Care Committee.

PIER:

David Summers reported the PIER Committee discussed their responsibility from the state and strategic plans. He advised that the committee talked about the PIER web page that the state has given the committee and the band width available to use as the one-stop shop for groups to use for their public education departments within their EMS agency or fire service. Mr. Summers stated that they have new content that has been added and that they are looking for content to be sent in by local EMS and fire services of best practices that they can post for the betterment of other departments within the state. He informed the council that the committee discussed enhancements to the upcoming EMS agency survey and tweaking the language so it will better help them measure their goal responsibilities. Mr. Summers stated that the committee also discussed ways get more awareness about the PIER webpage out to everyone including a blurb in BEMO COMM and working with the Florida Fire Marshalls' Association to gain access to their PUB ED directors. He advised that the committee discussed upcoming dates for some of the Florida Department of Transportation's vetted safety coalitions, the upcoming Ride Smart Florida Coalition, the Teen Safe Driving Coalition and the new Florida Occupant Protection Coalitions. The committee would like to encourage more membership to attend those great coalition meetings and that would also help them checkoff the different boxes on their surveys. Mr. Summers informed the council that during the PIER meeting he conducted a stop-the-bleed training and that the membership who attended received training for the bleeding control basics, through the American College of Surgeons vetted program. He advised he had enough time that he was also able to go over the instructor portion of the training and that the nine attendees can now be deemed stop-the-bleed trainers once their paperwork has been submitted to the National American College of Surgeons.

**Additional Comments:**

Mr. Kemp opened the floor for public comments.

Chris Cebellero, from Cebellero & Associates, explained that he has been a paramedic for 32 years and now his own consulting firm helping individuals around the state set up paramedicine programs. He explained that paramedicine programs in the state are currently in the third stage. The first phase was how do we build a program, the second phase was how do we get patients and the third phase is how do we get payment. Mr. Cebellero advised that one of his clients is Anthem Blue Cross/Blue Shield and that they have engaged with him to set up community paramedicine programs that they are paying for districts to do. He stated starting October 1st Anthem Blue Cross/Blue Shield will start to reimburse EMS agencies for navigating patients from the field. Which means if EMS personnel treat a patient at home or take a patient to urgent care, where they don't get reimbursement now, Anthem Blue Cross/Blue Shield will now reimburse them. Mr. Cebellero advised that this is the first step toward reimbursement for community paramedicine and he wanted to start getting the word out to everyone.

Chief Donatto asked if this would include people who are contracted with Blue Cross/Blue Shield.

Mr. Cebellero confirmed it covers all Blue Cross/Blue Shield patients and stated there is no requirement for a contract.

Dr. Gandia asked if the EMS system will have to have a contractual agreement with that entity.

Mr. Cebellero stated that is not a requirement and that the EMS personnel would conduct business as normal, asking the patient who their insurance carrier is and if it is Blue Cross/Blue Shield it will now give them different options if they do not think the patient really needs to go to the hospital.

Dr. Gandia asked if this would have a new protocol revision on these cases.

Mr. Cebellero advised that he thinks it does but that it is going to come from their medical director.

Dr. Gandia clarified that this going to require a whole new protocol set and revision for the sort of treat and not transport plans.

Mr. Cebellero confirmed that would be the case but that there are a lot of these already in place for the things that EMS personnel currently do in the field. He thanked the council for the opportunity to share this information.

Dr. Brad Elias, Department of Health Domestic Security Coordinating Group, informed the council that he serves on the domestic security oversight coordinating group specialty response team. He reported that one of the discussions that have come up lately is that they need EMS representation. Dr. Elias advised that he is at this meeting to ask for somebody to help represent EMS issues on this domestic security coordinating group specialty response team committee. This committee is used to provide best practices for domestic preparedness. He stated the committee is comprised of members of SWAT and bomb, USAR, agricultural response teams, and state medical response teams. Once an EMS representative is appointed they will be considered a subject matter expert at the table in these meetings and they are seeking input on the health side. Dr. Elias advised he would get with Mr. McCoy once the council has appointed someone.

Mike Hall, Nature Coast EMS, stated that he would like to discuss with everyone the importance of Senate Bill 967. He advised that the American Ambulance Association was instrumental in introducing this Bill which did not go through last session and was reintroduced this session of Congress. Mr. Hall informed the audience that this Bill covered three important things for the EMS industry as a whole. The first is it keeps extenders in place which will expire in December and Medicare rates will go down. The second is that is introduces a mechanism to do cost reporting for ambulance services. He advised the third is it recognizes an EMS’ provider’s status. Mr. Hall stated that on the national level they are meeting with the International Association of Fire Chiefs and he thinks there is a lot of ground that has been made on this bill.

Chief Donatto added that it is very important for people to understand this Bill and advised that the Florida Fire Chiefs, the International Association of Fire Chiefs, and the International Association of Firefighters are all opposed to this move as they feel it is an over-simplification that has a lot more to it. He also stated that doctors are the same status as we are; they are suppliers; they provide healthcare services.

John Peterson, Chief Administrative Officer for Sunstar Paramedics, stated that on behalf of his company Paramedics Plus he wanted to voice their support of Senate Bill 967.

Mr. Kemp opened the floor for additional comments from the council.

Ms. Bedford commented that at the beginning, Mr. Kemp said that the council needs to look at issues that are good for patient care and issues that are good for EMTs and paramedics. Therefore, based on this issue, which the council was asked to support, she suggested that the council seek out more information. She stated that there is a way we could request more facts so that the EMS Advisory Council could be aware of what the Bill is, if it is good for patient care and how it is good for patient care, and if it is good for EMTs and paramedics.

Mr. Kemp thanked everyone. He informed the audience that he just found out he would be the new chair of the council the Friday before this meeting and that he plans to look at committee assignments. Mr. Kemp advised that he has asked Mr. McCoy and Ms. Lowe to provide him with him everything that they have related to the EMS Advisory Council and that he plans to review every word of every document. He stated he will be looking into increasing the participation of the ex-officio members; and that they will be looking for a vice-chair, secretary and parliamentarian within the group. Mr. Kemp asked if anyone had an interest in one of these positions to email Ms. Lowe.

Mr. McCoy advised that the next meeting will at the Sanibel Harbour Marriott but that the dates have not been finalized yet as the original timeframe chosen for the meetings are the same week as the EMS Expo in Las Vegas. He stated that the state is working to reschedule the dates and discussing with the hotel if the dates can be moved. Mr. McCoy asked the audience to be aware that there is a survey going out to all EMS agencies and asked help to make sure their groups gets them filled out. He stated the survey is voluntary but that it does help with the strategic plan efforts. Mr. McCoy also informed the audience that there will be another leadership training available at the upcoming fall meeting.

Ms. Conte advised that the Air Medical Transport Conference will occur October 16-18, 2017 in Texas. She stated that she also like to see, if possible, if the Florida Air Medical Association would fit into the groups that are reporting at every council meeting.

Mr. Kemp asked if there were any further comments from the council. With no further comments he stated, that it is an honor to be the chair of the council and that he knows they are going to do great things. He advised he believes Florida is a leader in EMS and that there are two things that have made Florida one of the best EMS systems in the country and they both happen to be in the statute. The first is the Florida grants program which has provided millions of dollars to EMS systems all over Florida to do things that we would not be able to do otherwise. The second thing that is in the statute is this council. Mr. Kemp stated this is amazing and that it does not exists in most states and that the council represents a lot of different aspects of EMS. He advised that the discussion during this meeting shows how what is said during these meetings can help others to see things that they need to know more about, so that they can do more reading or research.

The meeting was adjourned at 12:30 p.m.