

John H. Armstrong, MD, FACS State Surgeon General & Secretary

Vision: To be the Healthiest State in the Nation

FLORIDA EMERGENCY MEDICAL SERVICES ADVISORY COUNCIL (EMSAC)

Meeting minutes from the meeting of: November 19, 2014

Member Name:	Voting Status:	Attendance:
John Bixler, EMS Section Administrator	Non-Voting	Present
Leah Colston, Chief, Bureau of Emergency Medical	Non-Voting	Present
Oversight	-	
Cindy Dick, Division Director,	Non-Voting	Present
Emergency Preparedness and Community Support		
Charles E. Moreland, Ed.D., Chair	Voting	Present
Daniel Griffin, EMS Educator, Vice Chair	Voting	Present
Chief Darrel Donatto, EMS Administrator (Fire)	Voting	Present
Michael Lozano, M.D., Physician	Voting	Present
Chief Tom Quillin, EMT (Non-Fire)	Voting	Present
Doris Ballard-Ferguson, Ph.D., Lay Elderly	Voting	Present
Jane Bedford, Paramedic (Non-Fire)	Voting	Present
Sheila Bradt, Emergency Nurse	Voting	Present
Alan Skavroneck, Commercial Ambulance Operator	Voting	Present
Tracy Yacobellis, Department of Education	Non-Voting	Present
Charles Hagan, III, Office of the Governor, Emergency Management	Non-Voting	Not present
Captain Timothy J. Roufa, Department of Highway Safety & Motor Vehicles	Non-Voting	Not-present
Preston Bowlin, Department of Financial Services	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

Note: A verbatim transcript of the entire meeting is available for review at the Bureau of Emergency Medical Oversight, EMS Section.

Florida Department of Health

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Call to Order

John Bixler called the meeting to order at 1:00 p.m.

A roll call was conducted and a total of nine voting members were present, therefore a quorum was met.

State EMS Section Report

John Bixler stated that the deadline for submitting Emergency Medical Services Advisory Council (EMSAC) nominations is Friday, November 21, 2014. He stated that there is a new process for appointing members to the council. After the nominations are received, the individual will be advised that they have been nominated and she/he will need to complete a Questionnaire for Appointments to the Florida Department of Health (DOH) Boards and Councils.

Medical Director's Report

Joe Nelson reported that the Medical Directors Association met after the last EMSAC conference call on October 23, 2014. Topics of discussion included the Ebola outbreak and the protocols available through the U.S. Center for Disease Control and Prevention (CDC). Dr. Nelson encouraged all medical directors to continually monitor the CDC's website for updated Ebola recommendations.

Another topic of discussion was the model for EMS clinical guidelines, which was supported by the National Association of State EMS Officials. These guidelines have been released and are available for download. Also, Dr. Nasr presented a PowerPoint presentation for the medical directors on the topic of emergency physicians utilizing quick response vehicles for field response and how fellowship programs across the country are handling it.

The medical directors discussed section 401.445, Florida Statutes. One of the challenges that they often encounter is whether or not law enforcement is protected when they take a clinically incapacitated person into custody against their will. The next step would be to develop a dialogue with the Police Chief's Association and the Sheriff's Association and determine how we can make certain that law enforcement officers are protected in terms of liability.

Council Member Reports

Darrel Donatto, Florida Fire Chief's Association (FFCA)

Chief Donatto stated that some providers need additional protective personal equipment (PPE) in preparation for treating an Ebola patient. The FFCA believes required funding to ensure that all providers in Florida are adequately equipped should be a high priority. Ensuring that there are model guidelines and coordinating responses with hospital providers is critical as well.

Cindy Dick stated that one of the challenges during the Ebola preparedness planning was discovering the amount of expired PPE that providers had in stock. She is interested in seeing a subcommittee created to develop a strategy for the deployment and maintenance of those caches of PPE. Also, she would like to circulate the expired material to training venues. Chair Moreland requested that Chief Donatto, Danny Griffin, Director Dick and himself work together to establish this subcommittee.

Danny Griffin, EMS Education

Mr. Griffin reported that the educators met after the last conference call on October 23, 2014 with the director of the National Registry of Emergency Medical Technicians. He stated that education will take place in the upcoming year on the registry.

Chair Moreland then reminded the council to complete their EMT/paramedic recertifications and to remind their agencies to do the same.

Old Business

Chair Moreland stated that the draft charter will be emailed for everyone's comments and suggestions.

Mr. Bixler stated he has not received much feedback aside from Chief Donatto's suggestions. Additional comments and recommendations are encouraged.

New Business

John Bixler stated that the DOH is seeking a more concise state plan this year that includes important goals from both the council and the DOH.

Next, Mr. Bixler provided an overview of the one-page state plan draft. He began by stating that this plan improves and maintains an EMS system that provides evidence-based care in Florida.

Goal 1 aims to advance the EMS system and strengthen Florida's position as a recognized leader in EMS response nationwide through data collection, improved accessibility to EMS Tracking and Reporting System (EMSTARS) incident level data, effective leadership and communication.

The outcomes for Goal 1 include:

- Achieve 100 percent compliance with the standards of EMSTARS
- Improved access to EMS incident-level data for evaluation and benchmarking activities
- Improved linkage of EMSTARS incident-level data with other state data for outcome assessments

Mr. Bixler then identified the measures for goal number one:

- Increase the percentage of EMS agencies submitting all incident level data to EMSTARS to 70 percent by July 2015
- Increase the number of reports available to EMS agencies for evaluation and benchmarking by 50 percent by July 2015
- EMS providers must be EMSTARS compliant by June 2015 to be eligible for state EMS matching grant funds

Mr. Bixler then noted that the dates listed in the draft are within eight months or less because the DOH wants to focus on deliverables that can be achieved fairly quickly.

Next, Mr. Bixler stated Goal 2: improve the effectiveness of key EMS processes through access to care, benchmarking and partnerships.

The outcomes for Goal 2 include:

- Adopt National Association of State EMS Officials (NASEMSO) National Model EMS Clinical Guidelines
- Development of mobile integrated health care/community paramedic programs
- Improve patient access to care

Mr. Bixler stated that the National Association of EMS Physians received final approval of their national model EMS clinical guidelines. We now have evidence-based guidelines that are being addressed at the national level, and we should realize these guidelines are coming from national data, which includes EMSTARS data. Florida is the largest contributing state.

Mr. Bixler then identified the measures for Goal 2:

- Florida Association of EMS Medical Directors endorses these guidelines by July 2015
- Increase EMS grant funding to EMS agencies implementing mobile integrated health care/community paramedic programs by five percent per year over the next five years

Mr. Bixler stated that the medical directors should endorse these guidelines while understanding that it should not be mandatory, it should be used at the local medical director's discretion.

Next, Mr. Bixler identified Goal 3: to ensure a stable EMS workforce to include EMS training consistent with the National Highway Traffic Safety Administration (NHTSA) Education Standards.

The outcomes for Goal 3 are:

- Paramedic training programs will be nationally accredited or have initiated the procedures for accreditation in accordance with the NHTSA EMS Education Agenda for the Future
- Adopt National Registry of Emergency Medical Technitians' (NREMT) EMT and paramedic certification examinations in accordance with the NHTSA EMS Education Agenda for the Future

The measures for Goal 3 are:

- By July 2015, increase by 50 percent remaining unaccredited paramedic training programs to obtain or initiate National EMS Education accreditation
- By July 2015, develop an implementation plan to require the NREMT certification exam for initial Florida certification

Mr. Bixler then explained Goal 4: to assure the EMS system is prepared to respond to all hazard events in coordination with state disaster plans during a Governor's Declaration of Emergency.

Mr. Bixler stated that all hazardous response is a constant priority for EMS in Florida.

The outcome for Goal 4 is:

• To control medical surge

The measure is:

• Emergency medical services and transport are available to 100 percent of persons needing it

Mr. Bixler then requested for any comments from the council on the draft state plan. Comments should be emailed to Bethany Lowe at: <u>Bethany.Lowe@flhealth.gov</u> by December 15, 2014. The document should be no more than 1-2 pages with goals that are reachable within the next six to eight months.

Next, Mr. Bixler stated that the document that was produced by the Strategic Visions Committee is still considered to be a valuable document with goals that should continue to be worked toward implementing. Mr. Bixler then said that this state plan is actually a document that takes into account input from constituent groups, as well as very important goals of the DOH.

Darell Donatto then stated that it is important for the EMSAC to go back to section 401.245, Florida Statutes, to review the council's role. He stated that the Legislature created this body with the intent of serving as the advisory board to the EMS Section. The EMSAC serves to make recommendations and assist the DOH in setting priorities. Therefore, the council has the option to provide our input and direction and set what we think are the priorities for the council.

Next, Chief Donatto stated there is some common ground on the data issue. However, until the problems with protection of the data are worked out, mandatory is not a good option. Voluntary data reporting, and the continuing education, and grant funding is the appropriate path on which we should remain.

In terms of the model EMS clinical guidelines, Chief Donatto stated that the FFCA supports the establishment of any best practices that are dynamic. Medicine is a science and science comes up with new answers based on new research that changes rapidly. The FFCA is opposed to adopting and mandating any statewide protocol. The FFCA supports models and best practices.

Next, Doris Ballard-Ferguson stated that the council may need to review not only the statutory law but the regulations. Maybe some of the groups need to be in a separate organization that would not break the statutory duties of the EMSAC. Dr. Ferguson then requested access to the legislation and rules that govern the EMSAC.

Mr. Bixler then stated that one of the main directions that the DOH has for EMS in Florida is making the patient a priority. The DOH wants to see patient outcomes that have improved using all of the knowledge, guidelines and data not only from Florida but from across the country to show that there are evidence-based guidelines for patient care that are better than others.

Next, Leah Colston stated that the state plan is a document that is intended to highlight—based on the strategic plan that was previously developed—the higher level activities that our constituent groups may want to monitor. Chief Colston stated that this draft is an opportunity for the EMSAC to gather local input and local feedback on what it is we are missing at the state level. With that in mind, we at the DOH are tasked with producing for our leadership, a very concise document with very achievable goals for the EMS system.

Chief Colston then stated that input on the state plan, the charter and the outcomes that we are working toward is very important. However, the EMS Section at the DOH has parameters that must be worked through.

Chief Donatto then stated that it is important that the council recognizes there are a number of constituent groups out there in official positions. Those groups officially represent the people that deliver care in Florida. He stated that it is important that we focus on the official position of the constituent groups.

Next, Cindy Dick stated that the priorities outlined in the state plan are driven by the DOH's leadership, the council's strategic plan and our major stakeholder input.

Next, Mr. Bixler stated that the state plan will not take the place of the strategic plan that was adopted in February 2014. They are two separate documents.

Danny Griffin then stated that a couple of members on the educators constituent group were wondering if anyone at the DOH reviewed the achievements over the last five years. It appeared to them that an entirely new plan was taking effect with the assumption that none of the goals in the strategic plan have been reached in the last five years.

Chief Colston then stated that the new direction with the state plan was never intended to discount any of the previous work that has been done by this council and its constituent groups. Strategic plans are being reviewed and revised across the agency.

Public Comments

Chair Moreland stated that the state plan is not a five-year plan; it is a one-year plan. Dan Harshburger stated that between the state plan, strategic vision and the charter, everything is becoming convoluted. He suggested pinpointing which plan the council will go by soon.

Next, Jane Bedford announced that the Florida Initiative for Community Paramedicine, Mobile Integrated Healthcare will hold a workshop on Thursday, January 22, 2015 in Daytona Beach with the EMSAC meetings. Southeast TeleHealth Resource Center Director Rena Brewer will be presenting on telehealth in general, but with a focus on how it can work with EMS in the field. The group will also be working on defining the data collection for this initiative.

A final motion was made to adjourn the meeting. The motion was seconded and the meeting was then adjourned at 2:30 p.m.

Respectfully submitted:

Bethany Lowe Administrative Assistant II, EMS Section