

MINUTES

NORTH CAROLINA EMERGENCY MEDICAL SERVICES ADVISORY COUNCIL

Department of Health and Human Services
Division of Health Service Regulation
Office of Emergency Medical Services

Brown Building
Dorothea Dix Campus
801 Biggs Drive
Raleigh, North Carolina

August 12, 2014
11:00 A.M.

Members Present

Mr. Graham Pervier, Presiding
Mr. F. Wayne Ashworth
Dr. Kim Askew
Dr. William K. Atkinson
Mr. Bob Bailey
Mr. Todd Baker
Mr. Terry Barber
Dr. Michael Ghim
Mr. Jim Gusler
Ms. Viola Harris
Ms. Carolyn Hughes
Dr. Elizabeth Kanof
Ms. Traci Little
Mr. Donnie Loftis
Mr. Carl McKnight
Dr. Brent Myers
Mr. Robert Poe
Dr. Edward St. Bernard
Dr. Douglas Swanson
Dr. James Wyatt

Members Absent

Dr. Nicholas Benson
Dr. Ted Delbridge
Dr. Annette Greer
Mr. Dan Ingle
Ms. Lynn Norwood

Staff Members Present

Mr. Wally Ainsworth
Dr. Roy Alson
Mr. Doug Calhoun
Ms. Amy Douglas
Mr. David Ezzell
Ms. Regina Godette-Crawford
Mr. Tom Mitchell
Mr. Will Ray
Dr. Sharon Schiro
Mr. Donnie Sides
Ms. Julie Starr
Dr. Lew Stringer
Mr. Brad Thompson

Others Present

Mr. Bryan D. Blanton, NCAEMSA/Catawba County Emergency Services
Mr. Greg Chapman, Center for Prehospital Medicine, Carolinas Medical Center
Mr. Bradley Dean, Rowan County Emergency Services
Mr. Joel Faircloth, NC Association of Rescue and EMS
Dr. Ed Hartman, Johnston County EMS
Dr. David Jacobs, Carolinas Medical Center
Mr. Gordon Joyner, NC Association of Rescue and EMS
Ms. Joyce Korzen, Carolinas Healthcare System
Mr. Ben Lawson, Johnston County EMS
Mr. Steve Mauney, Iredell County EMS
Ms. Lisa McCanna, Carolinas Medical Center
Dr. Erin Noste, MEDIC
Mr. Joe Penner, MEDIC
Ms. Tonja Mikell-Pool, NC Association of EMS Educators
Mr. Chris Raynor, NC Community College System
Dr. Dev Sangvai, NC Medical Society
Mr. David Stepp, McDowell EMS
Dr. Andrew Thomas, MEDIC
Dr. Michael Thomason, OEMS Trauma Medical Advisor, Carolinas Medical Center
Mr. Chris Thompson, Wilson County EMS
Mr. Kenny Weatherington, NC Community College System
Mr. Danny West, NC Association of Paramedics, Charlotte Fire Department
Ms. Joyce Winstead, NC Board of Nursing

- (1) Purpose of the Meeting: The NC EMS Advisory Council met to hear reports from the Injury Committee, the Compliance and Education Committee and receive updates from the Rules Task Force and Healthcare Preparedness Response & Recovery program. Also, a special presentation was given by Dr. Lew Stringer on the deployment of the Mobile Disaster Hospital to Mississippi.

(2) Actions of the Council:

Mr. Pervier, chairman of the Council, called the meeting to order at 11:00 a.m.

- (a) Motion was made by Mr. Bailey, seconded by Mr. Ashworth and unanimously approved that:

RESOLVED: The EMS Advisory Council minutes of the May 13, 2014 meeting be approved as submitted.

- (b) On behalf of the Rules Task Force, motion was made by Mr. Bob Bailey and unanimously approved that:

RESOLVED: The OEMS move forward with the proposed version 2 EMS and Trauma rules.

Explanation: At the November 12, 2013, EMS Advisory Council meeting, Chairman Pervier appointed a task force to address the proposed revisions to the EMS and Trauma rules. On January 8, 2014, the task force conducted statewide teleconferences at seven locations across the state. Two additional sites were originally scheduled to participate; however, technical difficulties resulted in these sites being closed. In order to accommodate receipt of comments from the eastern portion of the state, the task force decided to conduct an additional “in-person” public meeting on January 21, 2014, at the East Carolina University Heart Institute in Greenville.

The task force met in Raleigh on March 10th to review all comments received during the comment period and worked with staff to prepare a final draft for presentation to the EMS Advisory Council at the August 2014 meeting.

Subsequent to the final draft, the American College of Surgeons released its 2014 guidelines. This document had changes from their previous document and resulted in the need for additional discussions with the NC Trauma Community and the NC STAC to ensure agreement in how we can utilize the new ACS Guidelines and still meet the needs of the NC EMS and Trauma Community regarding the requirements for trauma center designation. Therefore, another group was put together chaired by Dr. Thomason and stakeholders were brought together for more discussion.

At the conclusion of Mr. Bailey’s report, he advised the members it is the recommendation of the task force to support version 2 of the rules and proceed with rulemaking.

(3) Other Actions of the Council:

- (a) Mr. Pervier welcomed guests to the Council and gave a special welcome to Ms. Traci Little recently appointed.
- (b) On behalf of the Injury Committee, Mr. Ashworth reported on the following item:
- Dr. Sharon Schiro gave a trauma update which involved the software package that we now use to track all data. Ms. Schiro reported that the NC Trauma Registry is in the process of moving from version 4 to version 5 which requires a substantial amount of work to move from one version to another. The long term goal is to merge the two data systems. The quality of data from version 5 is much better than version 4.
- (c) On behalf of the Compliance and Education Committee, Mr. Robert Poe reported on the following items:
- Ms. Kimberly Sides gave the following Compliance update:
 - Effective May 1, 2014, the Agency began primarily accepting electronic fingerprinting for EMS professionals undergoing national criminal history background reviews. Moving to an electronic fingerprinting process has benefited both the individual undergoing the criminal history review and EMS agencies employing these individuals by making this process timelier and less burdensome. The process is running smoothly with the Agency receiving these reports within a three day turnaround time.
 - The Agency is working to offer an electronic payment option to EMS professionals needing to complete national criminal history checks. This process should go live within the next few weeks.
 - The monitoring portion of the EMS Credentialed Personnel Chemical Dependency Recovery and Rehabilitation Program is being completed within the Agency.
 - In the fiscal note developed for the current rules revision project, moving the monitoring of the Chemical Dependency Program in-house is estimated to save the participant up to \$7,500.00 over current costs.
 - Mr. Todd Messer gave the following Education update:
 - Currently, there are 9 CoAEMSP accredited institutions and 15 in the letter of review process. One site visit is scheduled for the end of the month.
 - The 41st annual EM Today conference will be held in Greensboro on October 4 – 8, 2014. Online registration opened on June 1st. We currently have 250 registrants.
 - Staff is working with shareholders and stakeholders to develop a Community Paramedic/MIH curriculum. A proposed rough draft has been established and staff is waiting on additional comments.

- Staff continued to work on draft versions of the Educational Guidelines for Initial Courses under the Education Standards. A meeting will be held in the coming months with shareholders and stakeholders to collaborate on the clinical and field hours.
 - Mr. Donnie Sides gave the following rules update:
 - The EMS Advisory Council Rules Revision Task Force has concluded its work in vetting the proposed rule changes and Mr. Bob Bailey, Task Force Chair, will give a status report to the full Council at today's meeting.
 - The OEMS is still engaged with interested parties statewide in developing rules for Community Paramedic programs. Ongoing discussion is being held with other state agencies to assist in identifying funding mechanisms to support these programs.
- (d) In Dr. Winslow's absence, Ms. Godette gave the following Medical Director update:
- Nineteen (19) system modifications have been approved.
 - Dr. Winslow, Mr. Tom Mitchell and two of the eastern staff recently visited the eastern System Directors.
 - The July edition of the NC Prehospital Care has been published and is now available online.
 - Dr. Winslow is working closely with Public Health and experts throughout the state to give guidance on Ebola. A statewide CIS message has been sent out to all providers. Dr. Myers reported there are patients in quarantine in the state due to travel, not due to illness. A guidance, in coordination with Public Health, is coming out within the next 48 hours relating to script for screening at the 911 center and the Personal Protective Guidance for providers.
 - Dr. Winslow is working to increase access to Narcan by allowing all responders and law enforcement to carry Narcan with approval of local medical directors.
 - Dr. Winslow is working on Trauma Transfer Performance Improvement Program with Amy Douglas and Dr. Sharon Schiro.
 - The New/modified NCCEP protocols are in the July issue of the NC Prehospital Care Journal which includes the following:
 - Selective Spinal Immobilization protocol and its respective procedure
 - Procedure 5 CPAP
 - Policy 21 RSI
 - Appendix F Restraints
 - tPA transfer protocol added
 - Toxicology protocols 31 and 60 adjusted
- Dr. Swanson commented on several of the updates listed above as follows:
- The Selective Spinal Immobilization protocol in newer guidelines of decreasing the amount of backboards that are utilized. Also, it is appropriate to transport some patients with a cervical collar only.
 - Correction to the language used in the CPAP protocol with reference to comments on asthma has been updated.

- The restraint protocol has been updated removing need to contact medical control prior to implementing but also improving vital signs in patient reassessment.
 - A tPA interfacility transfer for essentially code stroke type patients has had some language to help implement guidance from stroke capable hospitals to tertiary stroke centers.
 - Changes to the overdose and poison protocols for both adult and pediatric essentially to bring involvement of the State Poison Center up more to the forefront in the case instead of later on in the algorithm.
- (e) Dr. Lew Stringer presented a PowerPoint presentation on the Mobile Disaster Hospital (MDH) that was deployed from North Carolina to tornado ravaged Mississippi on May 1st. It is to be expected to be in operation for 18 to 24 months while reconstruction is under way for the Winston county 41-bed hospital and eight of the community's nine medical offices that were damaged or destroyed in the EF4 tornado that struck on April 28th.
- (f) Mr. Bailey provided the Council with the following Healthcare Preparedness Response & Recovery update:
- Mary Beth Skarote has chosen to step back from program management responsibilities due to family relocation but will continue to work in support of the program. Will Ray has assumed coordination responsibilities for the program. Additionally, as a part of the healthcare coalition evaluation and development process, the state level program is evaluating roles and responsibilities in order to maximize effectiveness and efficiency down range.
 - The Notice of Award for the FY 14 Hospital Preparedness Program and the Public Health Emergency Preparedness Program was issued on July 1, 2014 and funding for the NC HPP is \$6,183,490.00 which is a reduction of approximately 37% from the previous year. Agency staff has met with all contractors for state and regional projects to discuss the impact of the reduction. Contracts are now either executed or in the process of being executed. The end of year HPP report is due to the funding authority no later than September 30th.
 - The eight healthcare preparedness regions have submitted region stakeholder-approved work plans for the current budget year and those are currently under review at the state office. Approval and execution of the work plans are hopeful to be completed the end of August 2014.
 - The joint PHEP-HPP site visit from the ASPR and the CDC, the federal granting agencies, scheduled for August has been postponed until November 2014.
 - A significant part of the National Mobile Disaster Hospital (NMDH), a part of the State Medical Response System and a Region IV asset, was activated and deployed in late April to assist the State of Mississippi with recovery from the April 28th tornados. The asset is currently on station in Louisville, MS and is projected to be for approximately 18-24 months. A small team of NCOEMS, NCEM, NC Baptist Men, and local emergency services personnel from Charlotte and Transylvania County deployed to assist with the deployment and initial operations of the hospital.

- At the request of the feds, we are in the process of trying to develop healthcare coalitions within the state. After the review of the current system status and of available data nationally related to other state systems, the advisory task force has endorsed a 24-month timeline for this evaluation and development. The timeline is a foundation to build from and is flexible to adjust based on information and feedback gathered through the process. A more detailed timeline will be released through the healthcare preparedness regions/RACs identifying the major benchmarks and opportunities for stakeholders and partner engagement as the process moves forward.
- (g) Dr. David Jacobs, Associate Medical Director for Trauma Services, Carolinas Medical Center in Charlotte wanted to formally go on record to voice several concerns about the application of the practicing trauma center status to a hospital in their region. Dr. Jacobs stated that this is not an issue about this particular institution but about the process by which this practicing trauma center status was provided. Chair Pervier asked Chief Godette to talk more in length with Dr. Jacobs and summarize where things stand and the appropriate way to propose a change if necessary.

Agency Update:

Ms. Crawford reported on the following:

- Ms. Crawford thanked staff and the Advisory council for their support during her husband's illness.
- Ms. Crawford introduced new staff member David Ezzell who has accepted the position of EMS Education Consultant. Mr. Ezzell is a paramedic with over ten years of experience in EMS Education and was recently employed with Eastern Wake EMS.
- Mr. Robert Glover has accepted the position of OEMS Regional Specialist in our Eastern Regional Office in Greenville and will be joining our staff on August 18th. Mr. Glover was former EMS Director for Currituck County.
- Based on the approval of the rules today, we plan to convene an EMS committee that will work on designing our EMS patches at the new levels. Our goal is to gather input from our stakeholders and post these at EM Today.
- Interest has been shown from several EMS providers and stakeholders about reintroducing the ambulance contract. Years ago we had this contract, but didn't have a lot of participation. The EMS Administrators have asked us to come back together and get back with state purchasing to revise the contract, and we will be putting together a stakeholder workgroup to assist with this.
- The 24th paramedic competition preliminaries were conducted in July at five sites across the state. Forty-four teams were entered in this competition.
- Budget passed and was signed by the Governor. Budget rejected the initiative to implement statewide Medicaid Non-Emergency Transport Broker (RFP). This was too costly compared to the current fee for service structure.
- Thanks to Wake County, the Hospital Association and many of our community paramedicine programs that are up and running, there was a provision in the current budget to appoint a study committee to look at reimbursing ambulance providers that divert mental health patients.

Secretary Wos is very supportive of this initiative, and we hope a study committee will be appointed to further look into this and we can look at getting the reimbursement rates changes.

The next Advisory Council meeting will be held at the Brown Building, Dorothea Dix Campus, on Wednesday, November 12, 2014.

There being no further business, the meeting adjourned at 11:50 am.

Minutes submitted by Julie Starr.