

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

May 9, 2017
11:00 A.M.

Members Present

Mr. Graham Pervier, Presiding
Mr. Robert Poe
Dr. Jeff Williams
Dr. Kim Askew
Mr. Kevin Staley
Dr. Ted Delbridge
Ms. Viola Harris
Dr. L. Lee Isley
Mr. Donnie Loftis
Mr. Todd Baker
Mr. Edward Wilson
Dr. Edward St. Bernard
Mr. Jim Gusler
Dr. Elizabeth Kanof

Members Absent

Dr. R. Darryl Nelson
Dr. Bill Atkinson
Ms. Traci Little
Ms. Lynn Norwood
Dr. Thomas Brant
Dr. Mark Shapiro
Dr. Douglas Swanson
Mr. Terry Barber
Dr. Nicholas Benson
Mrs. Carolyn Creech

Staff Members Present

Ms. Amy Douglas
Mr. Tom Mitchell
Mr. Will Ray
Ms. Susan Rogers
Dr. James “Tripp” Winslow
Mr. Todd Messer
Mr. Mark Payne
Ms. McKenzie Beamer
Mr. Brad Thompson
Mr. SanJuan Timmons
Mr. Ed Browning
Mr. David Ezzell
Mr. Roger Kiser
Mr. Joe Comello

Others Present

Mr. Jim Albright, Guilford County EMS, NCAEMSA
Rebecca Kepley, FMRT Group
Mr. Danny C. West, NCAP/Union EMS
Mr. Joel Faircloth, NCAREMS
Mr. Kenny Weatherington, NCCCS
Mr. Jerry Long, Jan-Care Ambulance
Mr. Greg Chapman, CMC
Mr. Steve Haemmerle, CMC
Dr. David Jacobs, CMC
Ms. Megan Waddell
Ms. Debra Petrarca, WakeMed
Dr. PJ Hamilton, WakeMed
(?) Chris Schmidt, WakeMed
Ms. Sarah McIntyre, WakeMed
Ms. Debra Beasley, WakeMed
Dr. Shaun Patterson, Wake EMS
Mr. Bryan Edwards, Union EMS
Mr. Samuel Robinson, McDowell EMS
Dr. Jay Wyatt, Trauma COT
Dr. Roy Alson, WFU/Forsyth EMS
Dr. Lew Stringer and wife Jane

- (1) Purpose of the Meeting: The NC EMS Advisory Council met to hear reports from the Injury Committee, the Compliance and Education Committee, the final report of the Community Paramedicine Project and receive updates from the Healthcare Preparedness Response & Recovery program. In addition, the Council met to consider WakeMed Health and Hospital’s Level I Trauma Center renewal designation and Carolinas Medical Center’s Level I Trauma Center renewal designation.

(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 Dr. Isley, seconded by Mr. Loftis, and unanimously approved that:

RESOLVED: The EMS Advisory Council minutes of the February 14, 2017 meeting be approved as submitted.

- b) On behalf of the Injury Committee, motion was made and unanimously approved that:

RESOLVED: Carolinas Medical Center's Level I Trauma Center designation be renewed effective through May 31, 2021.

Explanation: Carolinas Medical Center was reviewed on December 7 and 8, 2016 in a combined visit by the American College of Surgeons re-verification visit and Office of Emergency Medical Services (OEMS) designation renewal visit. Many strengths were noted and no state deficiencies were found.

- c) On behalf of the Injury Committee, motion was made and unanimously approved that:

RESOLVED: WakeMed Health and Hospitals' Level I Trauma Center designation be renewed effective through May 21, 2021.

Explanation: WakeMed Health and Hospitals was reviewed on March 29, 2017 with a visit by the North Carolina Office of Emergency Medical Services (OEMS). Many strengths were noted and no state deficiencies were found.

(3) Other Actions of the Council:

- (a) Mr. Pervier welcomed guests to the Council meeting

- (b) On behalf of the Injury Committee, Dr. Kim Askew reported on the following items:

- Updates on trauma site visit surveys, two that have been completed and one that is upcoming.
- Reports were presented on recent surveys of Carolinas Medical Center and WakeMed Health and Hospitals. Both come with numerous strengths, including their staff and personnel and involvement of their teams. No deficiencies were noted. Both reports were reviewed by the Injury Committee and the recommendation for continued designation was approved by the Committee.

(c) On behalf of the Education and Compliance Committee, Mr. Poe reported on the following:

▪ Compliance Update

- 479 applicants completed a national criminal background checks
- The agency received 33 formal complaints
 - ✓ 10 complaints were forwarded to the Eastern Regional EMS Office
 - ✓ 15 complaints were forwarded to the Central Regional EMS Office
 - ✓ 8 complaints were forwarded to the Western Regional EMS Office
- Case review panel reviewed 22 cases – 12 cases were submitted to the Disciplinary Committee for interview.
- The Disciplinary Committee agenda contained 32 cases
- The agency issued 4,010 EMS credentials between January 1, 2017 and April 30, 2017
- The agency issued 87 EMS instructor credentials
- The agency processed 159 epinephrine certifications

▪ Education update:

- Registration for the 44th annual EM Today Conference will open in June
- Registration for the annual Paramedic Competition is currently open. For more information contact Wally Ainsworth at the Central Regional Office
- Currently, 16 institution have achieved accreditation
- There are currently 22 institutions in the letter of review process
- A survey was sent out by Castle Worldwide which had very good response. Feedback provided was assessed by the agency's assigned Psychometrician. Based on the response, Castle Worldwide has developed new exam blueprints for future exams to be built on
- OEMS is working with Castle Worldwide to finalize a timeline for the transition to computer based testing. The target date is the first quarter of 2018. Additional information will be presented to the Council at a later date
- Chief Mitchell gave an update on new hires as well as the rules discussed at the last meeting

(d) Mr. Will Ray provided the Council with the following Healthcare Preparedness Response & Recovery update:

▪ Program update

- The vacant Training and Exercise Coordinator position has been closed and withdrawn. We will not be filling that position based on the change in federal guidance, potential work load for the position, and abilities of regional and state program staff. Duties will be reallocated to meet these specific needs moving forward.
- Federal site visit report has been completed and finalized based on the February assessment by our Field Project Officer. There were

no findings, but several recommendations to continue to improve administrative processes, as well as evaluation of return on investment with several technology platforms.

- Federal application was submitted and has cleared the first level of approvals. We are awaiting final approval from ASPR Headquarters on application and funding allocations.
- Based on the recent omnibus spending bill that was passed, we do not anticipate any major impact to our funding for this year. As Congressional appropriations are debated, any future impacts are unknown at this time.
- Our anticipated award for the year beginning 1 July is \$6,112,501. The high level budget details will be in the minutes after this meeting for your review and we are happy to answer specific questions about spending at future meetings. Overall, of the total we have allocated \$4,323,736 to our 8 healthcare coalitions, which is approximately \$200,000 increase from current year funding.
- As with current year funding, we utilized a four part funding formula based on base management costs + population + risk + licensed beds. The details will also be in your minutes for review.
- Work plans are targeted to be approved and in place the beginning of June for a July implementation.
- Focus for upcoming year is training and education, specifically surrounding new CMS rule implementation for licensed care facilities, medical surge exercises, operational readiness sustainment, and response planning for patient movement.

▪ Response update:

- NCEM Hurricane Season Kick Off is 6June.
- Reimbursement is still on going.
- NCHA is hosting an emergency preparedness symposium tomorrow to discuss lessons learned from hurricanes and fires.
- Regional full scales are completed and AARs under development.

▪ Special projects:

- EVD/HCP contracts are still in negotiation for several healthcare organizations.
- Focus continues to be all-hazards, high consequence

- (e) OEMS Chief Tom Mitchell made a special presentation of a United States flag that was flown over the US Capital at the request of the office of Senator Richard Burr and certificate to Dr. Lew Stringer. The certificate states “In Recognition of significant contributions to National Public health and Medical Emergency preparedness and disaster response in celebration of dedicated service to the state of North Carolina”. This presentation was given to Dr. Stringer for his distinguished career in emergency medical services and in disaster response at the local, state and federal levels. Dr. Stringer’s service began in Forsyth County where he was the first EMS Medical Director for that agency and served in that capacity for twenty eight years. He was the principal founder of the Special Operations Response Team (SORT) that contributed to disaster response operations across North Carolina. From 1990 through the early 2000’s, Dr.

Stringer was involved with the United States Public Health Service in shaping the Mobile Disaster Medical System. When he returned to North Carolina, Dr. Stringer worked with the Division of Emergency Management as a Medical Advisor and with the Office of Emergency Medical Services as a project manager for the Mobile Disaster Hospital; which, last year, the Department of Homeland Security transferred to the state of North Carolina. Dr. Stringer has impacted emergency medical services and health and medical response on all levels.

- (f) Mr. David Ezzell provided the Council with the following final report on the Community Paramedicine project:
- NCOEMS Community Paramedicine Grant was for \$350,000; New Hanover \$210,000, McDowell EMS \$70,000, Wake County EMS \$70,000
 - Programs: McDowell EMS-911 reductions, New Hanover-re-admission reductions, Wake County EMS-alternative destinations
 - Preliminary report submitted to the Legislature by 6/1/2016; final report due to General Assembly on 3/1/2017
 - Results during term of Grant:
 - ✓ McDowell County EMS: 230 patients between 4/1 and 10/31/2016; of those, saved 125 EMS transports and 125 ED visits avoided. Cost avoidance for not transferring 125 patients - \$102,833.
 - ✓ New Hanover EMS: FY16, 824 patients for a total of 3,055 visits. Initial visit time was 7.9 days from discharge, after receiving grant money that time decreased to 4.2 days. Prior to program, hospital had an overall 18% re-admission rate; for patients enrolled in their Paramedic programs, re-admission rate dropped to 11% as well as re-admission rates for all patient levels were reduced. Patients deemed high risk had a 13% re-admission rate
 - ✓ Wake County EMS: during time period, saw about 1200 patients for substance abuse and mental health issues; 47% did not go to the ED. Congestive heart failure project also showed a substantial cost savings
 - Limitations/Conclusions:
 - ✓ Study assessed reductions in EMS utilization
 - ✓ Substantial cost savings estimated-large range of potential savings
 - ✓ Further research needed in estimated cost savings
 - ✓ EMS transport savings, as well as savings to ED, outpatient and inpatient care, requires more research
 - ✓ Consideration of alternative destinations/treatment costs
- (g) Dr. Winslow gave the following Medical Director update:
- New procedures and protocols have been adopted by the NCEP Committee. Information has been uploaded to the traditional visio file on website. David Ezzell is working with the PIC to get the information online.
 - FTP site is up for Medical Directors to access and download the documents
 - Public PDF should be online within the next week or so.
 - Agencies have until 12/31 to implement the new protocols. Protocols will reflect the new skill levels.

- Naloxone programs are still being implemented; agencies and first responders are encouraged to continue.
 - Violence research group being formed to monitor incidents of violence against EMT personnel. Dr. Jason Stopyra will be the lead.
 - Working on a program to monitor EMS crashes in the state. There are no databases in the country that monitor ambulance accidents.
 - EMS Medical Board Advisory Group will meet today to discuss scope of practice changes. Will also discuss keppra, phenobarbital, BIPAP and the ketamine issue.
 - Dr. Wyatt brought attention to the issues with the coordination of organ donations and the Medical Examiner's office. Will be looking into this later in the month to try and resolve.
- (h) Mr. Tom Mitchell gave the following agency update:
- OEMS hired two new staff members since last council meeting; Mr. Danny Allen, assisting in Compliance and Mr. San Juan Timmons, central region education specialist
 - Currently in the process of rolling out the new Credentialing Information System; updating the system from a SAS platform to an open source platform. Will be rolling out to staff on 5/19; after bugs are worked out, will roll out to the public
 - Secretary Cohen has appointed Dr. Susan Kansagra from the Department of Public Health as the point person on the opioid crises for the Department of Health and Human Services
 - EMS will meet this Friday with Dr. Kansagra to discuss the perspective of EMS on this issue and what EMS can offer to assist with the opioid crisis
 - Senate Bill 424, which allows for the sum of six million five hundred thousand dollars (\$6,500,000) for the 2017-18 fiscal year to be used for statewide expansion of community paramedicine program, has made it through cross over. This bill will go to a committee hearing tomorrow in which OEMS will participate.
 - Rules update:
 - ✓ Rule 204 dealing with the Air Medical issue and their affiliation with a Level I or Level II Trauma Center, which was previously passed by the Council, went to Rules Review Commission to be codified and received ten letters of objection causing it to have to go to the General Assembly. Will be heard by the General Assembly to determine how to proceed.
 - ✓ Rules 224 and 410, passed by the Council at the February 14th meeting, goes to the Medical Care Commission on Friday to enter in to the rule making process. If approved at the Medical Care Commission, will go out for public comment and be published in the register
 - EMS Week is May 21-27, with EMS-C day on May 24

Other Business

- Dr. Delbridge inquired as to the EMS perspective on the opioid crisis. Chief Mitchell advised that OEMS has a phenomenal amount of data access through the Performance Improvement Center regarding opioids. Initiatives across the state include agencies called out to an overdose and reversing with narcan are leaving a second dose of narcan with the patient who does not want to be

transported. Some agencies are beginning to send community paramedics, along with social service personnel, to follow up on the patient who overdosed and try to convince that individual to seek help rather than continue to overdose. Heat maps have been developed to track the administration of narcan across the state which reveals areas where there have been repeated reversals; with this data, areas in need of the most help are revealed.

- Chairman Pervier announced that Dr. James Wyatt will be reappointed to the Council soon. Appointment letter is presently on the Secretary's desk for signature.
- Dr. Roy Alson announced the demise of Dr. Donald Vaughn. Dr. Vaughn was very active in developing the ALS program in Wake County. He helped spearhead the pre-hospital DNR program and made many outstanding contributions in OEMS.

There being no further business, the meeting adjourned at 12:04 pm.

Minutes submitted by Susan Rogers