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 11, 2020 11:00 A.M.

Members Present

Dr. Kim Askew Mr. John Grindstaff Dr. Bill Atkinson Dr. R. Darrell Nelson Dr. Jeff Williams Dr. Douglas Swanson Mr. Jim Albright Dr. L. Lee Isley Mr. Todd Baker

Members Absent

Mr. Donnie Loftis Mr. Jim Gusler Mr. Kevin Staley Mrs. Carolyn Creech Mr. Graham Pervier Mr. Robert Poe Mr. Chuck Elledge Dr. Kimberly McDonald

Staff Members Present

Mr. Tom Mitchell Ms. Susan Rogers Dr. James "Tripp" Winslow Ms. Melynda Swindells Ms. Amy Douglas Ms. Toshiba Oates Mr. Matt Peeler Mr. Andrew Baird Mr. Edward Wilson Ms. Viola Harris Dr. Jay Wyatt Dr. Pascal Udekwu Mr. David Garrison Dr. Roberto Portela

Mr. Wally Ainsworth Mr. Todd Messer Ms. McKenzie Beamer Mr. Dale Sutphin Mr. Ed Browning

Keegan Bradley	Bryan Devinney
James Norwood	Christopher Warr
Greg Chapman	David Garber
Joel Faircloth	Erick Herring
Chris Hall	Erika Prezas
Pamela Lowther	Mick Stewart
Amanda Treadway	Nathan Murray
Angela Magill	Ned Fowler
Dale Griffin	Oriane Longerstacy
Aimee Grande	Carrie Gillilan
Andrew Godfrery	Paul Seaman
Derrick Myers	Robert Rajsky
Elizabeth Freeman	Scott Wilson
R. McKame	Stormy Butts
Tonya Clark	Tyler Constantine
Susan Macklin	V. Lyman
JJ Knepp	West Barefoot
Joyce Winstead	Stacey Wright
J. Nixon	Don Garner
Anjni Joiner	W. Jainsworth
B. Stiehl	S.H. Little
TS Kimmie Horn	

- (1) <u>Purpose of the Meeting</u>: Due to the COVID 19 pandemic, and for the health and safety of all involved, the North Carolina EMS Advisory Council met virtually to hear reports/updates on Trauma Center Designations, Compliance and Education, HealthCare Prepraredness Program, Medical Director update and agency activity report.
- (2) <u>Actions of the Council</u>:

Dr. Kim Askew, Co-Chairman of the Council, called the meeting to order at 11:00 a.m.

a) Motion was made by Dr. Isley, seconded by Mr. Todd Baker, and unanimously approved that:

RESOLVED: The EMS Advisory Council minutes from the February 11, 2020 meeting be approved as submitted

b) On behalf of the Injury Committee, motion was made by Mr. Todd Baker, seconded by Mr. Andrew Baird, and unanimously approved that:

RESOLVED: Vidant Medical Center Level I Trauma Center designation be renewed effective through June 30, 2024

Explanation: Vidant Medical Center was reviewed in a joint visit with the ACS on January 29-30, 2020. Many strengths were found and there were no deficiencies.

- c) On behalf of the Injury Committee, motion was made by Mr. Todd Baker, seconded by Mr. Andrew Baird and unanimously approved, with one abstention by William Atkinson, that:
 - RESOLVED: WakeMed Cary Hospital Level III Trauma Center designation be extended through June 30, 2022.
 - Explanation: WakeMed Cary was reviewed for initial Level III Trauma Center Designation by the Office of Emergency Medical Services on May 9, 2020. There were many strengths found. There were no deficiencies, however, there were areas of weaknesses that required addressing. The facility was given a one year designation and did address the weaknesses within the designated time and was given the additional two years.
- d) Motion was made by Mr. Todd Baker, seconded by Dr. Doug Swanson, and unanimously approved that:

RESOLVED: Proposed 10A NCAC 13P Rules shall be moved forward to the Medical Care Commission

- Explanation: 10A NCAC 13P proposed rule changes shall go before the the Medical Care Commission in November to begin the rule making process
- (3) <u>Other Actions of the Council:</u>
 - (a) Dr. Askew welcomed guests to the Council meeting and announced to the Council and guests the appointment of Kevin Staley, a past Council member who has been appointed by the Secretary to fulfill the unexpired term of Dr. Edward St. Bernard. Kevin will be representing the Public and previously served on the Council from 2016-2019.
 - (b) Ms. Amy Douglas reported the following trauma update:
 - Two trauma center site visits that would have been presented at the June Advisory Council meeting which was canceled due to the pandemic. The following hospitals designations have been approved and certificates have been provided to the centers:
 - ✓ Vidant Medical Center in Greenville was reviewed in a joint visit with the OEMS and ACS in January. There were no deficiencies found and they have been granted re-designation as a Level I Trauma Center. Vidant was also re-verified by the ACS as a Level II pediatric trauma center.
 - ✓ WakeMed Cary was initially designated as a Level III trauma center in May 2019 and granted a one-year designation with some follow-up requirements to receive the remaining two years of an initial designation. The following requirements have been met and WakeMed Cary received the remaining two years of their initial designation.

- 1. A more comprehensive PI plan was needed with true loop closure occurring. Three examples of PI audits were provided. One related to neurosurgical tele-consult for patients experiencing intracranial injury. The second was for monitoring of non-surgical admissions and the third monitors palliative care consults.
- 2. Documentation was provided that the required attendance by trauma surgeons and multidisciplinary liaisons has met or exceeded the 50% requirement
- 3. The number of FTE's to support the trauma program has increasedTNC position has gone from .50 to fulltime.There is a full-time as well as .25 registry support. There is addition support PI support with shared positions from the ED PI and Orhto PI programs
- Due to COVOD-19 the ACS has suspended all site visits scheduled for the remainder of 2020 and granted a one-year extension on all verifications. I have worked with our centers who are ACS verified and had visits scheduled. There are no non-ACS site visit scheduled for at least a year
- A trauma system report was distributed prior to the meeting. The plan is to have this report available annually and to hopefully involve the trauma centers in future reports to include research, PI, Injury Prevention or other initiatives to share with stakeholders
- (c) Ms. Melynda Swindells gave the following Compliance update:
 - Mail distribution to the Wright Building is on Tuesdays and Thursdays only
 - Compliance staff is currently working remotely; however, staff have been assigned office days to ensure paperwork to and from the SBI continues to move. Staff can be reached via email or calling the main phone line
 - The office is beginning to receive fingerprints from individuals a some of the LEA open to non-criminal applicant fingerprinting. The compliance unit is current with paperwork processing; however, turnaround times have increased due to delays in receiving reports
 - We are beginning to request expedited processing from the SBI/FBI for specific needs by agencies
 - Disciplinary Committee meetings resumed in June and heard the backlog from canceled meetings in March, April and May. All meetings are held virtually via TEAMS to ensure the safety of all involved. Participation by members and EMT personnel has been very good. The next Disciplinary Committee meeting is schedule for later this month, August 25
 - N.C.G.S. § 93B-15.1 is a new law that was signed into law by Governor Cooper in July 2020 and will become effective n December 1, 2020. The new law allows individuals with military training and experience (as well as their spouses) to apply for a North Carolina credential. The OEMS Compliance manager is working with the Attorney General's office and the OEMS Education Manager, Todd Messer, on a guidance document that will be posted on the OEMS website prior to this law going into effect.

• The new law allows individuals to apply for credentialing using military training and experience. The training and experience will be reviewed by the Education unit to ensure it meets the equivalency of NC current requirements. A criminal record background check will be required

- (d) Mr. Todd Messer gave the following Education update:
 - The North Carolina EMS Expo is scheduled for May 16-19, 2021 with the pre-conference beginning on May 14, 2021
 - We have run into compatibility issues with computers and program with regards to the Ethics Course for the EMS Disciplinary Committee. We are working on resolving these issues
 - Due to the COVID pandemic, Instructor Workshops have been cancelled and/or postponed. The requirement has been temporarily waived for renewals; however, it is still required for initial credentialing. Once it is safe and we are allowed, we plan on offering many workshops across the state
 - Initially, institution, instructor and personal credential expirations were extended for 180 for those expiring between March31, 2020 through June 30, 2020. Subsequently, those expiring between July 31, 2020 through December 31, 2020 were also extended by 180 days
 - The state has allowed institutions to utilize creative ways to meet the required clinical/field time and required skills. AEMT and Paramedic students may obtain a maximum of 50% of their skills and field time as the second person on an ambulance crew. All modifications must be submitted to and approved by the Office of EMS.
 - Scantron never shut down exam sites. Any shut down was done on a local level/decision. We are aware of four sites the remained open, with limited number of candidates allowed to test for safety reasons.
 - Applicants legitimately affected by site cancellations/issues will be worked with on a case by case basis
- (e) Mr. Dale Sutphin gave the following HPP update:
 - OEMS and the Hospital Preparedness Program have been heavily involved with the COVID response. HPP activated on January 23 to support the Division of Public Health
 - State Emergency Response Team was activated on March 9, which brought in the entire OEMS team for support
 - Primary operations have included long term care support by providing PPE and emergency staffing support for facilities.
 - On July 15, we launched the Long Term Care Prevention and Outbreak Response Project with the primary objective to provide assistance with infection prevention and control; including testing of staff and residents and short term staffing support to nursing homes and adult care homes following the COVID 19 outbreak
 - Staff are being onboarded, trained and developed to support these facilities. This is a collaboration between the Hospital Preparedness Program, Division of Public Health, East Carolina University Doctorial Nurse Program and UNC Statewide Program for Infection Control and Immunology

- Personal Protective Equipment supply chain support for healthcare partners and strategic COVID 19 pandemic migration mitigation efforts all across North Carolina has been involved operating a 116,000 square foot warehouse to provide support for overall missions. To this date, staff has handled over 7,000 resource requests, including vetting, processing and shipping
- Medical surge planning and coordination with hospital systems across the state on COVID 19 surge plans and triggers, monitoring hospital capacity and regional coordination
- We have had partner engagement webinars for a wide variety of HPP partners and the in state renal disease network collaboration engagement for COVID 19 preparedness and response
- Roger Kiser led a team down to Atlanta in July to retrieve the mobile disaster hospital assets that had been previously deployed in support of the Grady Hospital mission back in December. The EMAC agreement was extended beyond the initial 90 days at Grady's request, then the demobilization was further delayed for safety reasons due to the protest impact in the Atlanta area near Grady Hospital
- The ICU that had been deployed is being decommissioned and will have some equipment removed so it can be placed in a replacement asset that should arrive later this year
- The team was also activated during Hurricane Isaias and coordinated a State Medical Support Shelter and ambulance strike team to support Brunswick County. Coordination included with CAPRAC, Duke, Triad and Metrolina Healthcare Preparedness Coalitions for those missions in addition to providing PPE supplies for multiple county sheltering operations with engagement from Med-Carolina and Eastern Healthcare Preparedness Coalitions
- Two additional grant allocations have been provided to the Hospital Preparedness Program, specific for COVID 19 response. The majority of the funding has gone to statewide projects to support Healthcare Coalitions for COVID 19
- (f) Mr. Wally Ainsworth was to provide an update on the rules process; due to technical difficulties, the report was made by Mr. Tom Mitchell
 - Rules that were emailed to the Advisory Council, for their review, prior to today's meeting is scheduled to go before the Medical Care Commission in November. The OEMS is requesting an approval from the Advisory Council to move forward.
 - Most of the changes are related to Trauma rules, aligning them with the ACS Guidelines
 - Package does not include the degree section for EMS personnel that public hearings were held on last year, will be addressed at a later date. There are some requirements for Level I and Level II Instructors
 - Presenting proposed rule changes to the Medical Care Commission is the first step in about twelve step process
- (g) Dr. Tripp Winslow gave the following Medical Director update:

- North Carolina Medical Board recently approved unrestricted use of ketamine after a one year pilot project involving nineteen counties; very good outcomes with very minimal complications
- NCCEP is presently developing protocols, specifically Dr. Nelson, for the use of ketamine. Systems will be allowed to make their own adjustments; however, they will still be required to report complications to the office
- There will be a virtual Medical Directors meeting in October; approximately the same time it was to be held at the EMS Expo. Notification has been sent out via Continuum and there will be a follow up with details
- (h) Mr. Tom Mitchell gave the following agency update:
 - The Council members were thanked for the patience and understanding as the office works through how to effectively and safely conduct the meetings in the midst of the pandemic. It is the hope of the office to physically meet for the November meeting; however, that decision will rest solely on the pandemic progress. Council members were urged to provide the office with feedback on how they felt the meeting went
 - Many thanks to the OEMS staff for their dedication and hard work during the pandemic response and the recent hurricane response
 - Many thanks, also, to the EMS agencies across the state for their response during this crisis and the hurricane response. Even in the midst of a pandemic, EMS agencies reached out prior to Hurricane Isaias offering to send crews as part of an Ambulance Strike Team, which made a tremendous impact to those affected by the storm
 - As part of the response to the pandemic, one of the Governor's executive orders exempted the requirement in General Statute to meet four times a year
 - Currently, we have limited staff physically working in the Raleigh, Conover and Kinston offices. Staff that is not deployed to the warehouse works mostly remote. There has been some planning to re-populate the Raleigh office but no timeline has been set to implement

There being no further business, the meeting adjourned at 11:59 am.

Minutes submitted by Susan Rogers