

FINAL

**STATE BOARD OF EMERGENCY MEDICAL SERVICES
OHIO DEPARTMENT OF PUBLIC SAFETY
MEETING MINUTES
April 21, 2010**

Chaired by James Davis

Board Meeting Date and Location: April 21, 2010, Ohio Department of Public Safety, 1970 West Broad Street, Columbus, Ohio 43223

Board Members in Attendance: Ms. Pamela Bradshaw, Dr. Thomas Collins, Dr. Deanna Dahl-Grove, Mr. James Davis, Ms. Joyce Fischer, Ms. Vickie Graymire, Mr. James Holcomb, Mr. John Kubincanek, Mr. Mallory, Mr. Mark Marchetta, Mr. Daryl McNutt, Dr. John Pakiela, Mr. James Parrish, Dr. Pomerantz, Mr. Mark Resanovich, Mr. Craig Self, Dr. Steve Steinberg, Mr. William Vedra

Board Members Absent: Mr. David Fiffick, Mr. William Quinn

Staff Members Present: Alan Boster, Dr. Carol Cunningham, Tim Erskine, Heather Frient, Tom Gwinn, John Kennington, Karen Mack, Chuck Milam, Sue Morris, Doug Orahoad, Ellen Owens, Carol Palantekin, Richard Rucker, Bob Ruetenik, John Sands, Joe Stack, Yvonne Tertel, Melissa Vermillion, Diane Walton

Guest and Public Attendance: Dr. Jeffrey Caterino, The Ohio State University Department of Emergency Medicine; Jay Clevenger, Ohio Fire Academy; Dr. John Crow, Trauma Committee; Lynn Haas, Cincinnati Children's Hospital; Dan Fitzpatrick, Ohio Fire Chiefs' and Ohio State Firefighters' Associations; Kathy Haley, Nationwide Children's Hospital; Terrie Stewart, The Ohio State University Medical Center

Mr. Davis called the meeting to order at 10:00 AM.

Roll Call

Mr. James Davis	Here
Mr. Mark Resanovich	Here
Ms. Pamela Bradshaw	Here
Dr. Thomas Collins	Here
Dr. Deanna Dahl-Grove	Here
Mr. David Fiffick	
Ms. Joyce Fischer	Here
Ms. Vickie Graymire	Here
Mr. James Holcomb	Here
Mr. John Kubincanek	Here
Mr. Daryl McNutt	Here
Mr. William Mallory	Here
Mr. Mark Marchetta	Here
Dr. John Pakiela	Here
Mr. James Parrish	Here
Dr. Wendy Pomerantz	Here

Ohio Department of Public Safety
State Board of Emergency Medical Services
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Mr. William Quinn, Jr.
Mr. Craig Self Here
Dr. Steve Steinberg Here
Mr. William Vedra Here

Mr. Davis welcomed new Board member, James Parrish, Chief of the New Philadelphia Fire Department, who is replacing Mark Burgess.

REVIEW AND APPROVAL OF THE BOARD MINUTES

ACTION: Motion to approve the February 24 and 25, 2010 EMS Board minutes. Marchetta first. Pomerantz second. None opposed. Motion approved.

OPEN FORUM

Validation of the Simplified Motor Score in a State Trauma Registry, Dr. Jeffrey Caterino

Dr. Jeffrey Caterino presented results from a research project, *Validation of the Simplified Motor Score in a State Trauma Registry*, funded by the Division of EMS grants. Amy Raubenolt also assisted in the study. The purpose of the project was to look at the Glasgow Coma Score (GCS) to determine whether it is the most appropriate scoring method used for triaging patients to trauma centers. Over the last fifteen years, many studies have been done over concerns that the 15-point scale's interrater reliability and ease of use in the field. Some of the studies demonstrated that motor score alone could be sufficient. The Simplified Motor Score (SMS) is based on the GCS motor component alone and is a three-point scoring system. The study objective was to identify the accuracy of the pre-hospital SMS as compared to the GCS motor score for predicting outcome in injured patients. The data used was adults transported to a hospital by EMS with a complete GCS score that was contained in the Ohio Trauma Registry (52,000 patients met entry criteria). The outcome results were: Neurosurgical intervention 1.5%; Mortality 5.8%; EMS or ED intubation 7.36%; and Traumatic brain injury 15%. That data was then compared using both its SMS and GCS scores to determine the SMS accuracy compared to GCS. Clinically there was no difference between the performances of these two tests for any of the outcomes. Given known difficulties with GCS, the SMS may be a viable replacement for EMS agencies and provide a quicker evaluation by EMS field personnel. Prior to adopting use of the SMS, prospective field validation and measurement of EMS interrater reliability should be obtained. The Board and Dr. Crow would like Dr. Caterino to present the results to the Trauma Committee.

Ohio Trauma System Framework, Kathy Haley

A brief history of Ohio's trauma system and summary report of the 2010 Ohio Trauma System Framework was given by Kathy Haley, Trauma Program Coordinator at Columbus Nationwide Children's Hospital. Handouts of the lecture and the framework were distributed. She said this is an action item being brought to the Board for guidance in identifying the next steps and discussion of opportunities to implement the framework. Ohio's trauma system, which has been in existence for over 30 years, currently has 45 in-state trauma centers, and more Level III trauma centers (primarily serving rural areas) than any other state in the nation.

In 2008, the State Trauma Committee, the Ohio Society of Trauma Nurse Leaders, and other stakeholders met to evaluate and determine the state of Ohio's trauma system. The Model Trauma Systems Planning and Evaluation (MTSPE) Assessment was used to review Ohio's system. It consists of 113 components that were reviewed and scored. The score indicates Ohio's trauma system would be considered very basic. Strengths include the existence of a statewide trauma-specific committee and pre-hospital components of the hospital system. Weaknesses include lack of statutory authority to enhance the current system, lack of a comprehensive plan, and lack of integration with injury prevention programs. The Trauma Committee created a workgroup to develop a strategic framework and have selected Florida's trauma system plan concept as Ohio's model. The problem statement adopted was: *As of 2010, Ohio has some components of an effective trauma system, but lacks a comprehensive system plan that ensures optimal care for injured patients.* Items needed to fix the problem statement are clear oversight, accountability among system participants, ongoing assessment of risk factors and gaps, universal (statewide) and consistent provision of care/services to victims and evaluation and regulation of existing services. A copy of the action plan with goals and desired outcome was distributed.

The next potential steps include Board approval of the framework document, receipt of public input, creation of short and long term goals, and transition of Ohio's strategic framework into a more comprehensive plan. After discussion, Mr. Davis proposed that the document be sent to the identified stakeholders for their review and comment to determine if there would be any concerns or pushback. From those comments, if it appears it is in the best interest to hold a public forum, then that would be done. Mr. Davis thinks this fits into the strategic plan for the future of the Board. If Board members pass the motion, he would recommend putting together an ad hoc workgroup to assist Mr. Erskine and the committee working on these issues. Ms. Graymire feels this is another opportunity for Ohio to be the benchmark for developing a strong comprehensive trauma system.

ACTION: Motion to accept the draft Trauma Model System framework document and have Mr. Erskine send it to identified stakeholders for their review and comment. Marchetta first. Pomerantz second.

Mr. Self suggested that the correspondence to the stakeholders include language indicating the EMS Board support, leadership, and advocacy for this issue. Dr. Crow said the Trauma Committee would like an open forum for stakeholders to come before the Board with their opinions as this process moves forward.

None opposed. Motion passed.

ACTION: Motion to create an ad hoc committee to ensure the communication flow between Board and Trauma Committee members, and to assist the Trauma Committee in addressing the obstacles regarding the model trauma system framework implementation. Pomerantz first. Steinberg second. None opposed. Motion passed.

Mr. Self and Dr. Steinberg will work with Kathy Haley and Mr. Erskine will send a letter to the identified stakeholder groups. Mr. Erskine changed one sentence from “of the Board” to “of the Committee working on behalf of the Board” as requested by Mr. Davis.

Mr. Davis said he earlier requested approval of the minutes, but it should have been for the consent agenda, which also includes certification and accreditation items along with the minutes.

ACTION: Motion to approve the consent agenda items including: February 24 and 25, 2010 EMS Board minutes; EMS certifications, continuing education extension, and reciprocity granted for the period of February 1, 2010 through March 30, 2010; and initial and renewal applications for education certificates of approval and accreditation for the period of February 1, 2010 through March 30, 2010. Marchetta first. Pomerantz second. None opposed. Motion approved.

GOLDMAN PROCEEDINGS

The Goldman Proceedings were called to order at 10:55 AM.

Roll Call

Mr. James Davis	Here
Mr. Mark Resanovich	Here
Ms. Pamela Bradshaw	Here
Dr. Thomas Collins	Here
Dr. Deanna Dahl-Grove	Here
Mr. David Fiffick	
Ms. Joyce Fischer	Here
Ms. Vickie Graymire	Here
Mr. James Holcomb	Here
Mr. John Kubincanek	Here
Mr. Daryl McNutt	Here
Mr. William Mallory	Here
Mr. Mark Marchetta	Here
Dr. John Pakiela	Here
Mr. James Parrish	Here
Dr. Wendy Pomerantz	Here
Mr. William Quinn, Jr.	
Mr. Craig Self	Here
Dr. Steve Steinberg	Here
Mr. William Vedra	Here

Mr. Davis said a majority of Board members were present. Three adjudication proceedings were presented in the matters of EMS Case Number 2009-278-101, Janelle L. Clark, EMS Applicant Number 178107; EMS Case Number 2009-465-304, Duane A. Daniel, EMS Certification Number 106098; and EMS Case Number 2009-515-304, Jason J. Danford, EMS Certification Number 84247. These proceedings shall be an affidavit-based adjudication relative to a Notice of Opportunity for Hearing mailed to the respondents and served according to the Administrative Procedures Act (Chapter 119. of the Ohio Revised Code). As the respondents did not properly

request a hearing, they do not have the ability to submit written or oral testimony today, but may be present to hear the proceedings and outcome.

The Board reviewed evidence, including exhibits and affidavits from EMS investigators and/or staff, associated with the aforementioned cases. In lieu of a stenographic record, let the minutes reflect that the original sworn affidavits and exhibits shall be kept as the official record of the proceedings in the aforementioned matters in the office of the Division of EMS. Mr. Davis recognized Principal Assistant Attorney General Yvonne Tertel for the purpose of providing a brief synopsis of the cases and recommendations for disciplinary action.

Ms. Tertel said if members are wondering why they received more cases to review than what are being heard today, it is because proper service is required to have the hearings and some cases had service issues.

Ms. Tertel noted that none of the individuals were in attendance. She said Janelle Clark submitted an incomplete application and the recommendation is to deny the request. Both Mr. Danford and Mr. Daniel were random audits and failed to provide documentation of their continuing education and the recommendation is for revocation.

ACTION: Motion to admit the sworn affidavit(s) and the accompanying exhibit(s) in the aforementioned case(s) into evidence. Pakiela first. Marchetta second. None opposed. Motion approved.

There being no further evidence to come before the Board, the Goldman Proceedings were closed at 10:58 AM. Mr. Davis asked for a motion to deliberate on the sworn affidavits and exhibits. A written copy of the Board's decision will be mailed to the respondents.

ACTION: Motion to go into private session for the purpose of quasi-judicial deliberations on these matters by roll call vote at 10:58 AM. Collins first. Pakiela second. None opposed. Motion approved.

Roll Call

Mr. James Davis	Here
Mr. Mark Resanovich	Here
Ms. Pamela Bradshaw	Here
Dr. Thomas Collins	Here
Dr. Deanna Dahl-Grove	Here
Mr. David Fiffick	
Ms. Joyce Fischer	Here
Ms. Vickie Graymire	Here
Mr. James Holcomb	Here
Mr. John Kubincanek	Here
Mr. Daryl McNutt	Here
Mr. William Mallory	Here
Mr. Mark Marchetta	Here
Dr. John Pakiela	Here

Mr. James Parrish	Here
Dr. Wendy Pomerantz	Here
Mr. William Quinn, Jr.	
Mr. Craig Self	Here
Dr. Steve Steinberg	Here
Mr. William Vedra	Here

The Board returned from private session at 10:59 AM.

ACTION: In the matter of EMS Case Number 2009-278-101 Janelle L. Clark, EMS Applicant Number 178107, the Board finds that Ms. Clark applied for certification as an EMT and failed to submit documentation of her criminal conviction as required pursuant to Ohio Administrative Code 4765-10-03(B)(1) and 4765-8-02(E); therefore, the Board moves to deny Ms. Clark's application for certification to practice as an emergency medical technician. Pomerantz first. Marchetta second. Holcomb abstained. Motion passed.

ACTION: In the matter of EMS Case Number 2009-465-304 Duane A. Daniel, Emergency Medical Technician-Basic Certification Number 106098, the Board finds that Mr. Daniel committed fraud, misrepresentation or deception in applying for renewal of a certificate to practice as an emergency medical technician and failed to accurately document all continuing education requirements after attesting to the fact that he had satisfied the requirements to renew such certificate in violation of Ohio Administrative Code Sections 4765-10-03(A), 4765-10-03(B)(1), 4765-9-01(I), 4765-8-04(A)(2)(b), and 4765-15-03; therefore, the Board moves to revoke Mr. Daniel's emergency medical technician certificate to practice. Pomerantz first. Marchetta second. Holcomb abstained. Motion passed.

ACTION: In the matter of EMS Case Number 2009-515-304 Jason J. Danford, Emergency Medical Technician-Paramedic Certification Number 84247, the Board finds that Mr. Danford committed fraud, misrepresentation or deception in applying for renewal of a certificate to practice as an emergency medical technician and failed to accurately document all continuing education requirements after attesting to the fact that he had satisfied the requirements to renew such certificate in violation of Ohio Administrative Code Sections 4765-10-03(A), 4765-10-03(B)(1), 4765-9-01(I), 4765-8-04(A)(2)(b), and 4765-17-02; therefore, the Board moves to revoke Mr. Danford's emergency medical technician certificate to practice. Pomerantz first. Marchetta second. Holcomb abstained. Motion passed.

Chair Report, James Davis

Mr. Davis asked if there were any questions about the communication with Senator Carey regarding the national accreditation process and proposed grant. Director Rucker sent a letter thanking Senator Carey for his efforts and work on the issue along with a copy of the National EMS Agenda for the Future.

Mr. Davis believes the committees for 2010 have set their goals, made member appointments, and asked for a motion to approve the committees for 2010.

ACTION: Motion to approve the 2010 committees. Pomerantz first. Marchetta second.
None opposed. Motion approved.

ACTION: Motion to approve Kevin Barnard and representatives of the five nationally accredited paramedic programs in Ohio to the National Accreditation Committee. Kubincanek first. Collins second.

It was agreed that committee members should receive a welcome letter and the scheduled time slots for the EMS/Homeland Security and Advanced Care/TEMS Committee meetings need to be switched with each other.

None opposed. Motion passed.

Ms. Graymire asked if the Board would continue to meet every other month for the remainder of the year. Mr. Rucker said that is the case, except for the special meeting in May.

State Medical Director Report, Dr. Carol Cunningham

The Regional Physicians Advisory Board (RPAB) all member meeting has been changed from November 11th to Tuesday, November 9th due to Veteran's Day. The November RPAB chair meeting will also be changed to November 9th at 1:00 PM.

Dr. Cunningham received an initial Regional Physician Advisory Board (RPAB) Region X application for Dr. Robert Gershkowitz and recommends for Board approval.

ACTION: Motion to appoint Dr. Robert Gershkowitz to RPAB Region X. Marchetta first. Pomerantz second. None opposed. Motion passed.

Dr. Cunningham said the RPAB chairs received a request for a waiver from Dr. Todd Zeiger to become an EMS Medical Director. According to the rule, 4765-3-05(A)(1) through (A)(5) requirements must be met by all EMS medical directors. In addition, 4765-3-05(A)(6) requires that the physician be board certified by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine or board eligible by completion of an emergency medicine program that is recognized by the American Board of Medical Specialties of the American Osteopathic Association. Physicians who meet all of the requirements within 4765-3-05(A) with the exception of (A)(6), and must complete either the NAEMSP Medical Director's course or the Ohio ACEP Medical Director course. The RPAB chairs reviewed the curriculum vitae and felt that Dr. Zeiger was not eligible for a waiver due to the fact that 4765-3-05(A)(2) was not met (active in emergency care of patients). The RPAB Chairs look consider two general guidelines to determine if a physician meets "active in emergency care" requirement that is cite in rule. The first guideline is that the physician be active in the practice of emergency medicine, critical care delivery, or demonstration of proficiencies in the skills provided by EMS personnel, which constitutes about fifty percent of their practice. They feel the RPAB medical director needs to proficient in intubations if they are to teach that skill. The second criteria is that the physician is active in the clinical practice of emergency medicine and has significant professional experience and expertise in EMS. Mr. Rucker said he thinks this would not require action to decline the request for the waiver, but will check with Ms. Frient on that.

Dr. Cunningham reported the declared emergency by the governor that expanded the scope of practice for EMTs to administer vaccinations during the H1N1 outbreak was terminated on March 31, 2010 at midnight.

Dr. Cunningham was a panelist at the Institute of Medicine workshop April 15, 2010. She was the only panelist addressing EMS and spoke on behalf of Ohio's initiatives on H1N1. Dr. Cunningham wanted to formally thank the EMS Board, the Homeland Security committee, the Ohio Department of Health, the Ohio Emergency Management Agency, the Ohio Hospital Association, and Lake County for providing her the resources she required to create her presentation. One suggestion she had is that hospital personnel should consider taking a National Incident Management System (NIMS) course because when the EOC was put into operation, information regarding H1N1 was disseminated via NIMS.

The Great Lakes Regional Stroke Network lost its funding and will disband June 30, 2010.

Dr. Cunningham will be speaking at the Ohio Department of Health's stroke conference in Columbus on May 19th. She said this is the same day of the Board meeting, but her lecture will be in the afternoon.

STAFF REPORTS

Assistant Attorney General, Yvonne Tertel

Ms. Tertel said hearings are scheduled in May and June and it is possible the resulting report and recommendations might be available for presentation to the Board in August.

Legislative Liaison, Justin Long

Mr. Davis introduced Justin Long, the Division of EMS and Board's legislative liaison. Mr. Davis noted that Mr. Long was instrumental in helping him and Mr. Rucker to get an appointment to meet with Senator Carey regarding the national accreditation grant funding issue.

Mr. Long reported they are working on amending the H1N1 bill (HB 357) to change the wording from "dispense" to "deliver" and removing the Director of Health from being able to declare the emergency.

The MOLST bill regarding "do not resuscitate" orders is not moving. Mr. Davis said there are two major groups with strong objections to the way the language is written. Dan Fitzpatrick, representing the Ohio Fire Chiefs' and Ohio State Firefighters' Associations, said they are an interested party on the bill. He said Hospice, Ohio Right to Life, and other groups have differing viewpoints make it difficult for a bill to be passed. Mr. Fitzpatrick said only the easiest bills are being passed and he does not anticipate movement on most bills until after the election.

EMS Staff Legal Counsel, Heather Frient

No report was given.

Executive Director, Richard Rucker

Mr. Rucker introduced Ebony Merritt, an epidemiology student who is interning for the Division to aid Mr. Erskine, Ms. Morris, and the Trauma Committee in the area of research.

Mr. Rucker and John Sands have corresponded with Chris Niswander, Chief of Madison Township Fire Department in Richland County, regarding safety of their first responders due to law enforcement layoffs. He is concerned about liability and that providers might lose their certification if calls are not handled satisfactorily. Mr. Rucker told him it is a local issue not one for which the EMS Board can provide legal advice. Chief Niswander contacted his local prosecutor who is going to look for an opinion from the state Attorney General. Mr. Rucker told Chief Niswander he would present his concerns to the Board and opened it up for discussion. Mr. Rucker said law enforcement layoffs are occurring in many counties throughout the state. A discussion ensued and items discussed included the issues that EMS Board could not provide guidance for all scenarios that might be encountered, abandonment issues would have to be determined on a case by case basis, waiting on law enforcement is not a new issue in EMS especially in rural areas with limited resources, and scene safety is outlined in textbooks and included in the national curriculum. Mr. Resanovich said it would be difficult to create a position paper regarding scene safety, when to stay and treat or leave, because that is a decision made by each provider based on their knowledge, skills, and the surroundings they encounter. The Board felt it is a local issue and a position paper was not feasible due to the number of scenarios that could be encountered. Mr. Davis said he didn't think there was a need for immediate action, but asked members to research it and talk with their local community providers and bring any ideas back for discussion.

Mr. Rucker said the booster seat law the Board supported took effect April 7, 2010. Any child under eight years old or under 4-foot 9-inches will be required to be in an approved booster or safety seat. Violation of the law is considered a secondary offense in Ohio.

Information on the Division's NHTSA reassessment was distributed and Mr. Rucker asked Board members to review and be prepared to discuss this at the May Board meeting. This is a quick overview of the previous recommendations and current status. There are some items where progress will be made prior to the reassessment.

Mr. Rucker reported that Doug Orahood, Division of EMS Fire/Testing Coordinator, received the Department of Public Safety Technician Employee quarterly service award for his work on the online fire testing, which saved the Division over \$100,000.

Certifications, John Kennington

Mr. Kennington presented two requests for exemption from continuing education by certificate holders due to active military service.

ACTION: Motion to approve the request(s) for exemption(s) for continuing education for two individual(s) (certification numbers 106768 and 130868) serving on active military duty during the certification period. Collins first. Pakiela second. None opposed. Motion approved.

***** Lunch 11:50 AM to 12:15 PM *****

COMMITTEE REPORTS

Committee Report Agenda

A 2009 yearly report from the Education and National Accreditation committees was provided to the Board. The committee report is available for viewing on the EMS Division website at <http://www.publicsafety.ohio.gov/links/Committee%20Report%20Feb%202010.pdf>.

Education Committee, James Holcomb

One of the major items contained in the Committee Report Agenda is removing intubation from the EMT-Basic curriculum. The committee will be recommending that the EMT-B curriculum include objectives for training in supraglottic airway for a pulseless and apneic patients and the removal of advanced airway objectives for orotracheal intubation with pulseless and apneic patients. This will be presented to the Board in August and can be discussed further at that time. If approved, the implementation date would be January 2011.

EMS-Children, Dr. Wendy Pomerantz

The committee is working on the pediatric preparedness program for the state, which is one of the performance measures for EMSC. ACEP is participating and Mr. Stack will be speaking with the Ohio Hospital Association and Emergency Nurses Association to solicit their participation. The University Hospital System of Cleveland will pilot the program. Their goal is to have emergency departments achieve pediatric readiness.

They will be repeating the survey completed several years ago for EMS agencies on equipment and hospitals on transfer agreements. This is a national mandate for performance measures to determine whether improvements have occurred.

The EMSC Committee was tasked by Mr. Davis to review the state of pediatric preparedness in Ohio. A document completed in 2008, *Planning For the Needs of Children in a Disaster* prepared by the Ohio Pediatric Disaster Preparedness Committee, will be reviewed.

Dr. Pomerantz said Mr. Erskine has agreed to assist the committee in looking at pediatric Trauma, similar to what was done for geriatrics, utilizing the new epidemiology intern to determine the proper age that defines a pediatric patient and if they are being transported to the proper facilities. After Dr. Catarino's presentation, they would like to do a study on simplified motor score versus Glasgow coma for pediatric patients. Dr. Cunningham said the state trauma legislation already defines the age of pediatrics as being 16, but it would be interesting to look at the subsets, particularly children requiring car seats versus booster seats versus seatbelts in trauma patterns. Dr. Pomerantz said the question in pediatrics has always been why the arbitrary age of 16 was chosen. There are only three pediatric trauma centers in the state, so if children can be treated at an adult trauma center, that might benefit the children's outcome. Dr. Cunningham said some of the patient transfer decisions are determined by the liability carriers of the general surgeons. Dr. Pomerantz said if they could scientifically determine the age, it would be helpful.

The committee, which currently has twenty voting members, plans to reduce the number of members to fifteen. The committee is developing their Five-year goal and will present at the next Board meeting. Their next committee meeting is June 15th.

Firefighter and Fire Safety Inspector Committee (FFSI), Phil McLean (Doug Orahood)

The annual report Chair McLean created highlighting 2009 accomplishments was distributed. The committee has been holding “train the trainer” sessions on the 16 Life Safety Initiatives throughout the state. Approximately 160 fire instructors will be trained to provide this training to others based on the National Fallen Firefighter Courage to Be Safe program.

The Division’s annual Fire Program Director and EMS Coordinator conference will be held October 7th and 8th during Fire Prevention week.

Mr. Davis asked whether Mr. Orahood has spoken with Mr. Parrish regarding his designee for the FFSI committee. Mr. Orahood said he has not had a chance to do so, but will speak with him later today.

Homeland Security, Mark Resanovich

The committee is waiting on their altered standard of care practice work assignment from the Ohio Hospital Association initiative and hope to have it completed by the end of June.

The committee is working on reviewing the Mass Casualty Incident Response plan draft, Tab B of ESF8 of CHEMPACK, and the Human Infection Disease Plan.

The committee will meet and work with the Ohio Division of Homeland Security to add continuing education training programs on the Division’s website using Lectora®. They are looking at the Seven Signs of Terrorism and an educational opportunity for blast injuries.

The TEMS subcommittee has been redirected to create legislation to enable the Board to open up the certification to specialty care and not just one specific classification. The plan is to begin writing draft legislation for the specialties, and rules for TEMS providers will likely be one of the first specialty care endorsements.

The next committee meeting will be July 20th.

Legislative and Rules Committee, Bill Mallory

The Rules and Legislative committee will become two separate committees beginning in June. The rules committee did not meet this month. The Legislative group met and discussed HB 241 (MOLST), HB 357 (changing “dispense” to “delivery”), and a proposed grant change to assist those programs wanting to become CoAEMSP nationally accredited. Justin Long provided updates on pending EMS/Fire legislation. Other items discussed included ambulance driver issues and changing provider titles to match the national accreditation changes. The committee is working on tweaking their goals and will present to the Board at a future meeting.

Medical Oversight, Research, and Grants Committee (MORG), Daryl McNutt

Dr. Collins reported that the MORG Committee is being redistributed. Medical Oversight will have its own committee and Research and Grants will remain a combined committee.

Dr. Collins said the Research and Grants Committee reviewed the grant process and have asked Ms. Frient and the staff to develop guidance regarding who should be reviewing grants and what ethical biases should be considered when using Board members and Trauma Committee members to ensure no conflict of interest or ethical violations occur in the grant review process.

The Grants Committee is in favor of providing grand funding for paramedic programs seeking CoAEMSP accreditation, but would like Board input regarding its implementation. It will require a rule change in 4765.07 to add an additional priority. The current Priority 1 funds are used for equipment for EMS agencies and Priorities 2, 3, and 4 are trauma research based as outlined in the trauma legislation. The grants with higher priority numbers require allocation of more money than grants with lower priority numbers. For example, the Priority 2 grant funding cannot be greater than Priority 1. Fiscal notifies the Division of the amount of funds available for all the grants and the grant committee then recommends to the Board what levels will be funded with how much money. Mr. Boster said OBM and Fiscal determine how any unclaimed monies can be treated.

The committee proposes creating two new priorities, one for national accreditation funding (Priority 6) and another for additional research pertaining to procedures, training, and staffing (Priority 2). A copy of draft language for these proposed priorities was distributed. Dr. Collins said Priorities 2, 3 and 4 are limited to trauma related research. This additional level would provide the ability to invest in research that covers all areas of EMS.

A lengthy discussion ensued regarding allowable accreditation application costs, timeframe of grant period, fund disbursement method, and school eligibility; however, further discussion was tabled until Ms. Frient would be in attendance in the afternoon.

Recruitment and Retention Committee, Daryl McNutt

Mr. McNutt said the committee is struggling to have enough members. Mr. Davis said this is an important committee and might want to expand the committee's responsibilities and getting more diversity on the committee. Mr. McNutt said they are putting together a survey to get feedback on the recruitment and retention issues.

OLD BUSINESS

The Ohio Department of Health (ODH) presentation regarding Patient Tracking that was made at the February Board retreat needs further discussion in order to provide them with feedback and input. ODH would like the Board to endorse their concept so they can add our group as endorsing their program. Mr. Davis stated that in the past the Board has endorsed the START triage method, which has the ability for electronic patient tracking through bar code or numeric number. Mr. McNutt said the ODH is marketing it in Northwest Ohio. Dr. Cunningham said patient tracking is a national initiative. The Ohio Hospital Association has purchased the OhioTRAC system, and from an EMS standpoint, a triage tag with a bar code is the only equipment requirement to be able to link into the system.

ACTION: Motion to have the EMS Board sign on as a supporting agency of the Ohio Department of Health's OhioTRAC patient tracking system. Self first. Dahl-Grove second.

Mr. Davis said there is no financial commitment unless the Board decides this is something that should be added to the grant eligibility list. Dr. Collins said the way he interprets the grant training/equipment list, bar code scanners are included.

None opposed. Motion passed.

NEW BUSINESS

Mr. Self wanted to update the Board on the status of the new ad hoc Strategic Planning committee. He and Ellen Owens have started drafting the document and the committee will begin meeting in the off Board months in July. They would like the assistance of committee chairs and committees to develop scenario planning and goal setting. If we looked back in 2015 and were successful beyond our wildest dreams, this is how Ohio EMS would appear. his strategic planning will allow the committee to develop the long-term plan to target as many goals as possible.

Mr. Davis said Steve Saltsman of the Columbus Division of Fire, who spoke at a previous Board meeting regarding the dangers and challenges facing EMTs and firefighters from foreign and domestic terrorism, offered a field trip for the Board to view demonstrations. The Board was in agreement. Mr. Davis will work on scheduling it for sometime in the fall.

Mr. Davis suggested individuals he would like as committee members for the ad hoc Trauma Model Committee approved earlier today by the Board.

ACTION: Motion to approve the following individuals as members of the ad hoc Trauma Model Committee: Vickie Graymire, Craig Self, Mark Marchetta, Dr. Dahl-Grove, and Mark Resanovich. Pomerantz first. Bradshaw second. None opposed. Motion passed.

Mr. Davis passed around a letter Chief McNutt received from an individual regarding the grant process that was complimentary. He would like the Board to respond to the letter and ask the gentleman if he has any suggestions for making the grant process better.

With Ms. Frient in attendance, the Board revisited the proposed grant priority regarding national accreditation. Dr. Collins said the members need to know what speed is needed for the Board to get the new priorities approved and into legislation. Ms. Frient does not have the language drafted, but the Board can approve the concept today. She is not sure how long it would take to get legislation introduced for this. Mr. Rucker said he received a call from Senator Carey's office asking for the language. Mr. Davis said whatever the Board decides to do, he would like it to be conveyed in a timely fashion to the impacted associations to work through their concerns so there is no pushback when the bill is introduced.

Mr. Davis said the commitment made with Senator Carey was that the Division was looking to also use the grant money in a more flexible way to allow funds to be used for the latest technology and education, but also to have a process in place to hold the Board accountable.

One of the other items agreed upon was that however the national accreditation program was funded, it would not have an impact on street providers and their ability to receive grant money. Mr. Rucker said that was discussed and there was also concern that if the funding language is too flexible, the legislation would not get passed.

Dr. Collins read the preliminary draft language for the proposed Priority 6 grant for approval.

ACTION: Motion to approve the concept of creating a sixth priority: “Sixth priority shall be given to all Ohio EMS accredited institutions for the purpose of pursuing initial national accreditation. Funding under this priority shall only be available up to and included grant award year 2016-2017”. Collins first. Holcomb second.

Mr. McNutt asked why a date is needed and Mr. Rucker said it is the extension provided to Ohio by the National Registry requires that all paramedic program be nationally accredited at the end of 2017 to maintain eligibility to take their certification examination. Therefore, the grant should not be continued beyond that time.

Mr. Mallory asked about what if a school wants to get nationally accredited for the EMT-Basic or EMT-Intermediate levels. Dr. Cunningham said CoAEMSP does accredit for all levels, and Ms. Frient said it should be clarified. Mr. Rucker said the only reason the grant money is being made available is because of a requirement that they have to be CoAEMSP-accredited if they are a paramedic program. If they are not a paramedic program, there is no reason for the Division to give them funding.

ACTION: Motion to amend the earlier motion to include “paramedic program” after the word national accreditation. Mallory first. McNutt second.

Ms. Frient wanted to clarify the language to say “up to an including” 2016-2017. Mr. Boster said in regards to the reimbursement process, they cannot reimburse anyone outside of the fiscal year parameter. Ms. Frient said to vote on the concept of the motion because she will need to work on language regarding reimbursement. Language was included to further clarify the concept as follows: *Sixth priority shall be given to Ohio EMS accredited institutions for the purpose of pursuing initial national accreditation at the Paramedic level. Funding under this priority shall only be available up to and including grant award year 2016-2017.*

Ms. Frient will need to research the reimbursement portion with Fiscal and will bring drafted language on that back to the Board.

None opposed. Motion passed.

Mr. Davis said now that the concept has been approved, the discussion can focus on other specifics such as whether the grant money would be provided in advance or be allotted through a reimbursement process. Mr. Rucker said Alan Boster, EMS Grants Coordinator, has dealt with the grant funding, both providing money up front and through the reimbursement process, and asked which process is easier to deal with and what Fiscal will allow. Mr. Boster said grants awarded are done on a reimbursement basis and invoices have to be dated within that fiscal time

period. Members suggested a proof of accreditation would need to be submitted. One concern raised was with regard to if a school receives a grant for a fiscal year, but the accreditation process is slow and it is not completed or invoiced until the next fiscal period. Mr. Boster said he would have to defer to Ms. Frient on whether fiscal or biennium budget years could be crossed. Another issue raised was if schools had already started the process, would they be eligible for grant money. Mr. Boster said if the expense occurs prior to the law being enacted, it would not be eligible. The invoices would need to be dated after the effective date of the law and members suggested making the grant retroactive. Ms. Frient said she would need to know how far back the Board wanted to reimburse schools. Mr. Self said there are programs out there who took the Board's vote in February as a direction and there are probably some programs already pursuing accreditation. He suggested the date be from February 25, 2010 up to and including the award year 2016-2017 and members agreed. Mr. Boster said since they would be dealing with fewer than fifty grants, if Fiscal would allow, the awards could be made in advance, which would provide two years for the schools to get accredited. Ms. Frient would like to know the Board's preference and have another alternative if the first option can't be done. She said to also cover the schools applying for national accreditation in the future. It was discussed that costs not eligible for reimbursement would include payroll expenses (staff, medical director), office supplies, and training equipment.

Other items discussed included defining school eligibility, having the provision of a grant award be on a needs basis, determining the grant eligibility of schools that are currently not conducting paramedic classes, and limiting awards to ten schools are year.

Mr. Davis wanted Ms. Frient to clarify that if the submission of this concept to Senator Carey's office would be deterred by Fiscal's inability to award these grants retroactively. If Senator Carey successfully changes the law, he may propose to create an avenue to provide grants retroactively could be created. Ms. Frient said if that happens, then it would be a fight between Fiscal and the law on how to make it happen.

Dr. Pomerantz reminded the Board that the new Priority 2 language would need approved in order to be sent to Senator Carey's office along with the Priority 6 language just voted on. Ms. Frient said if you think adding Priority 2 might be too controversial, you might want to submit the Priority 6 by itself. However, it can be included and if it becomes controversial, it could be removed.

ACTION: Motion to approve a new priority a new priority: "The second priority shall be given to entities that conduct research, test, and evaluate Ohio emergency medical service procedures, training, and staffing." Dr. Collins first. McNutt second. None opposed. Motion passed.

Investigations, Melissa Vermillion

ACTION: Motion to go into Executive Session for the purpose of discussing proposed disciplinary action(s) against certificate holder(s) which is pending or imminent court action under Revised Code 121.22(G)(3) and involve matter(s) that are required to be kept confidential under Revised Code 4765.102(B) at 1:58 PM. Bradshaw first. Marchetta second. None opposed. Motion approved.

Roll Call

Mr. James Davis	Here
Mr. Mark Resanovich	
Ms. Pamela Bradshaw	Here
Dr. Thomas Collins	Here
Dr. Deanna Dahl-Grove	Here
Mr. David Fiffick	
Ms. Joyce Fischer	Here
Ms. Vickie Graymire	Here
Mr. James Holcomb	Here
Mr. John Kubincanek	Here
Mr. Daryl McNutt	Here
Mr. William Mallory	Here
Mr. Mark Marchetta	Here
Dr. John Pakiela	
Mr. James Parrish	Here
Dr. Wendy Pomerantz	Here
Mr. William Quinn, Jr.	
Mr. Craig Self	Here
Dr. Steve Steinberg	Here
Mr. William Vedra	

******* Board returned from private session at 2:09 PM *******

2009-92-102	2009-588-602	2010-17-BE100	2010-61-E300
2009-320-304	2009-635-304	2010-33-E300	
2009-345-101	2009-659-304	2010-35-E100	
2009-494-102	2010-2-E100	2010-37-E300	
2009-587-101	2010-3-E100	2010-38-E300	

ACTION: Motion to accept the Consent Agreement(s) for the above listed case(s). Dahl-Grove first. Pomerantz second. Collins; Pakiela abstained – 2009-588-602; Holcomb abstained. None opposed. Motion approved.

2009-583-308	2010-22-E500
2009-680-503	2010-27-E100
2010-13-E500	2010-31-E100

ACTION: Motion to close the above listed case(s). Dahl-Grove first. Pomerantz second. Holcomb abstained. None opposed. Motion approved.

2009-526-401	2010-66-E400
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ACTION: Motion to close the above listed case(s) and refer case to local medical director/department. Dahl-Grove first. Pomerantz second. Holcomb abstained. None opposed. Motion approved.

2007-190-304

ACTION: Motion to close the above listed case(s) and reopen if subject reappears. Dahl-Grove first. Pomerantz second. Holcomb abstained. None opposed. Motion approved.

2005-426-102	2007-410-304	2009-501-101	2009-657-401
2005-453-102	2008-28-302	2009-512-101	2009-668-101
2006-245-101	2009-128-101	2009-513-101	2009-672-101
2006-284-101	2009-136-101	2009-551-101	2009-701-101
2006-404-305	2009-258-101	2009-565-101	
2006-405-206	2009-316-403	2009-573-101	
2007-107-305	2009-372-102	2009-648-101	

ACTION: Motion to close the above listed case(s) as the individuals have met the stipulations of their Consent Agreement(s). Dahl-Grove first. Pomerantz second. Holcomb abstained. None opposed. Motion approved.

2009-622-101 2009-337-308, permission to negotiate consent 2009-669-304 2009-772-304	2010-65-BE100 2010-70-E600
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ACTION: Motion to issue a Notice of Opportunity for Hearing(s) for the above case(s). Dahl-Grove first. Pomerantz second. Holcomb abstained. None opposed. Motion approved.

2010-4-E100	2010-85-BE100	2010-120-E100	2010-158-E100
2010-64-BE100	2010-86-E100	2010-122-E100	2010-159-E100
2010-68-E100	2010-87-E100	2010-128-BE100	2010-163-E100
2010-69-E100	2010-90-BE100	2010-139-E100	2010-165-E100
2010-72-E100	2010-106-BE100	2010-138-E100	2010-168-BE100
2010-75-E100	2010-107-E100	2010-146-E100	2010-171-E100
2010-76-E100	2010-108-E100	2010-147-E100	2010-176-E100
2010-82-E100	2010-109-E100	2010-148-BE100	2010-177-E100
2010-83-E100	2010-111-BE100	2010-154-BE100	2010-178-E100
2010-84-BE100	2010-118-E100	2010-155-BE100	

ACTION: Motion to close the above listed case(s) for one of the following reasons: inadvertently marked yes to conviction question, misdemeanor convictions which the Board has previously deemed “not involving moral turpitude,” continuing education cases which now meet the requirements, local non-patient care issues, and grandfathering issues of certification/conviction. Dahl-Grove first. Pomerantz second. Holcomb abstained. None opposed. Motion approved.

Mr. Rucker reminded Board members that the annual Board picture will be taken after the awards at the May Board meeting. He said in the past, members have worn uniforms and doctors have worn lab coats.

Ohio Department of Public Safety
State Board of Emergency Medical Services
April 21, 2010
FINAL

Mr. Davis said he will get with Mr. Parrish before the next Board meeting to discuss appropriate committee assignments for him and present to the Board for approval next month.

ADJOURNMENT

ACTION: Motion to adjourn the Board meeting. Collins first. Self second. None opposed. Motion approved. The meeting was adjourned at 2:23 PM.