

## COMMUNITY PARAMEDICINE AD HOC COMMITTEE MEETING

| MINUTES | DATE             | TIME    | LOCATION  |
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|         | October 15, 2013 | 3:00 PM | ODPS – Division of EMS<br>1970 W. Broad St., Columbus, Ohio 43218 |

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| <b>ATTENDEES</b> | <p><u><i>Committee Chairperson:</i></u> Deanna Harris</p> <p><u><i>Committee Members:</i></u> Pam Bradshaw, James Davis, Geoff Dutton, Dr. David Keseg, Joshua Tilton</p> <p><u><i>ODPS-Division of Emergency Medical Services (EMS) Staff:</i></u> Dr. Carol Cunningham, Anna Firestone, John Sands, Dawn Vondracek</p> <p><u><i>ODPS Staff:</i></u> None</p> <p><u><i>Guest:</i></u> Mary Ahlers, Karen Beavers, Eric Cortez, Tom Duffee, Holly Heron, Mike White, JD Postage, Mark Resonovich, Mike White</p> <p><u><i>Absent Committee Members:</i></u> Matthew Dick, Dr. Wendy Pomerantz, Gary Redd, Bruce Shade, Dr. Brian Springer, Dr. Paul Zeeb</p> |
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| ACTION ITEM(S) | PERSON RESPONSIBLE | DEADLINE |
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### AGENDA TOPICS

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| <b>TOPIC</b>                              | <b>Welcome</b>   |
| <b>DISCUSSION</b><br><i>(Chn. Harris)</i> | The meeting was called to order at 3:00 PM by Chairperson Deanna Harris. |

| ACTION ITEM(S) | PERSON RESPONSIBLE | DEADLINE |
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| None           |                    |          |

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| <b>TOPIC</b>                              | <b>Meeting Minutes</b>  |
| <b>DISCUSSION</b><br><i>(Chn. Harris)</i> | <p><u><i>ACTION:</i></u> A motion was made by Chn. Harris to approve the 6/18/13 draft meeting minutes with no changes. Ms. Bradshaw – First. Mr. Tilton – Second. None opposed. None abstained. Motion approved.</p> <p><u><i>ACTION:</i></u> A motion was made by Chn. Harris to approve the 8/20/13 draft meeting minutes with no changes. Mr. Dutton – First. Ms. Bradshaw – Second. None opposed. None abstained. Motion approved.</p> |

| ACTION ITEM(S) | PERSON RESPONSIBLE | DEADLINE |
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| <b>TOPIC</b>   | <b>Old Business</b>  |
| <b>DISCUSSION</b><br><i>(Dr. Springer and Committee Members)</i> | <p>The definition of “community paramedicine” was further refined (and derived from the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA) definition). Neither definition has been approved:</p> <p><i>“Community Paramedic – A state certified EMS professional who has completed a standardized community paramedic educational program and has demonstrated competence in the provision of health education, monitoring and services beyond the roles of emergency care and transport, and in conjunction with medical direction. The specific roles and services are determined by community health needs and in collaboration with public health and medical direction.”</i></p> <p><i>“Community Paramedicine - An organized system of services, based on local needs, which are provided by Paramedics who are members of the local or regional mobile integrated health care system and overseen by emergency or primary care physicians. This not only addresses gaps in primary care services, but enables the presence of EMS personnel for emergency response in low call-volume areas by providing routine use of the clinical skills and additional financial support from these non-EMS activities. The specific roles and services are determined by community health needs and in collaboration with public health and medical direction.”</i></p> |

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| <b>DISCUSSION</b><br><i>(Dr. Cunningham)</i>   | On July 12, 2013, a Community Paramedicine Conference was held in Cincinnati. Additionally, the University of Cincinnati has added Community Paramedicine to its curriculum. The University of Cincinnati Blue Ash is holding another symposium on September 27, 2013.  |                           |                                  |
| <b>ACTION ITEM(S)</b>  |   | <b>PERSON RESPONSIBLE</b> | <b>DEADLINE</b>                  |
| Chn. Harris will distribute information on the upcoming UCBA symposium.  |   | Deanna Harris             | October 15 <sup>th</sup> Meeting |
| <b>DISCUSSION</b><br><i>(Chn Harris and Committee Members)</i>   | <p><b>Committee Directives</b> – Goals and objectives were for community paramedicine in Ohio were discussed and refined as follows:</p> <ul style="list-style-type: none"> <li>• The committee decide they are going to “enable” (vs. own) community paramedicine.</li> <li>• The committee should determine whether the law needs to be changed before proceeding with the community paramedicine venture.</li> <li>• The committee will let communities identify their own needs and determine how best to accommodate those needs.</li> <li>• The committee should identify obstacles and points of opposition in preparation for a stakeholder’s meeting proposed for the 1<sup>st</sup> quarter 2014.</li> <li>• It has not yet been determined if the committee has the resources to handle this initiative.</li> <li>• Ohio EMS will be the watchdog for hospitals that use paramedics incorrectly.</li> <li>• The committee cannot prevent third parties from teaching community paramedicine before the State of Ohio has designed or established guidelines, but it can communicate through Listserv and Siren to keep students abreast of the current limitations but also the future opportunities of Community Paramedicine.</li> </ul> <p><b>Grants:</b></p> <ul style="list-style-type: none"> <li>• The Board has already approved grants for 2014. However, grants cannot be issued if Community Paramedicine exceeds Ohio’s scope of services.</li> </ul> <p><b>Pilot Program:</b> On Hold</p> <p><b>Legal Opinions:</b> Legal counsel not present</p> |                           |                                  |
| <b>ACTION ITEM(S)</b>  |   | <b>PERSON RESPONSIBLE</b> | <b>DEADLINE</b>                  |
| Chn. Harris will look into the implications of Board-approved Community Paramedicine grants.   |   | Deanna Harris             | October 15 <sup>th</sup> Meeting |
| <b>DISCUSSION</b><br><i>(Chn. Harris)</i>  | In order to move ahead with the Board directive on how Ohio can include Community Paramedicine as a viable option, legal must provide guidance.   |                           |                                  |
| <b>ACTION ITEM(S)</b>  |   | <b>PERSON RESPONSIBLE</b> | <b>DEADLINE</b>                  |
| John Sands will draft legal questions to seek guidance and determine the process of incorporating Community Paramedicine into Ohio laws and rules. Deanna Harris will review Mr. Sands will also ask that legal attend the next Committee meeting. |   | John Sands                | October 15 <sup>th</sup> Meeting |
| <b>DISCUSSION</b><br><i>(Chn. Harris)</i>  | The Committee agreed that in order to implement the Community Paramedicine directive from the EMFT Board, monthly 4-5 hour work sessions are necessary. The problem of committees overlapping also continues to be an issue.  |                           |                                  |
| <b>ACTION ITEM(S)</b>  |   | <b>PERSON RESPONSIBLE</b> | <b>DEADLINE</b>                  |
| Chn. Harris will ask Executive Director Melvin House for approval to hold monthly work sessions.   |   | Deanna Harris             | October 15 <sup>th</sup> Meeting |

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| DISCUSSION<br>(Dr. Cunningham) | <p>Dr. Cunningham reported that in a couple of years, hospitals will incur a penalty for re-admission, so Community Paramedicine may be an effective complement. We cannot mandate Community Paramedicine; the intent is to create an avenue for building a system for non-emergency settings.</p> <p>Minnesota and Missouri have already implemented Community Paramedicine. Missouri has a broad definition and states services cannot be duplicated. These state programs should be evaluated for relevancy to Ohio implementation, particularly in areas such as curriculum requirements, testing, certifications, scope of services and funding.</p> |
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| ACTION ITEM(S)   | PERSON RESPONSIBLE   | DEADLINE                         |
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| Dr. Cunningham will contact colleagues in both Minnesota and Missouri and provide an update at the next Committee meeting. | Dr. Carol Cunningham | October 15 <sup>th</sup> Meeting |

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| <b>TOPIC</b> | <b>New Business</b> |
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| DISCUSSION<br>(Chn. Harris) | Ms. Harris presented a company newsletter announcing that Community Paramedicine is being practiced by Ohio EMS providers. Anna Firestone, legal counsel, recommended the EMS providers be reported to Investigations but also suggested contacting the Assistant Attorney General for guidance. |
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| ACTION ITEM(S)  | PERSON RESPONSIBLE | DEADLINE                               |
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| Chn. Harris will present newsletter to EMFTS Board for deliberation of possible investigation of practicing outside of Emergency Care as outlined by law. | Chn. Harris        | October 16 <sup>th</sup> Board Meeting |

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| DISCUSSION<br>(Chn. Harris) | <p>Chn. Harris spoke with Gary Redd, who is no longer interested in being on the Community Paramedicine Committee. Also, Dr. Brian Springer does not intend to resign from the Committee. Chn. Harris requested a larger meeting room.</p> <hr/> <p><b><i>ACTION: Motion was made to remove Gary Redd from the Community Paramedicine Committee. All members were in favor. None opposed. None abstained. Motion was approved.</i></b></p> <p>Chn. Harris reported that interest in becoming Community Paramedicine Committee members exceeds the allowed membership.</p> <hr/> <p><b><i>ACTION: Motion was made to recommend to the EMFTS Board that Community Paramedicine Committee membership exceed 15 members. None opposed. None abstained. Motion was approved.</i></b></p> <p>Community Paramedicine Ad Hoc Committee applications were reviewed and approved (subject to EMFTS Board approval of more than 15 members) for: Mary Ahlers (TriHealth), Karen Beavers (EMFTS Board), Ernest Hatmaker (EMFTS Board), Holly Herron (Ohio Health) and Mike White (Newark Fire Dept). Additional applications are anticipated from JD Postage, Daniel Ellenberger and Tom Duffee.</p> <hr/> <p><b><i>ACTION: Motion was made to induct new members to the Community Paramedicine Committee. Those members are as follows: Mary Ahlers, Karen Beavers, Ernest Hatmaker, Holly Herron and Mike White. James Davis – First. Pam Bradshaw – Second. All members were in favor. None opposed. None abstained. Motion was approved.</i></b></p> |
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**DISCUSSION**  
*(Chn. Harris)*

The Committee agreed that a communication be sent out to stakeholders and EMS providers about the status of Community Paramedicine in Ohio. EMS providers practicing Community Paramedicine have no liability protections and are at risk by practicing outside of emergency activation. Schools have started offering classes on Community Paramedicine. Any communications should be informational and state that Community Paramedicine is being reviewed but has not yet been implemented and, therefore, cannot be practiced until written into the OAC and ORC.

***ACTION: Motion was made to ask Board to send out communications to stakeholders and EMS personnel about the status of Community Paramedicine in Ohio. James Davis – First. Pam Bradshaw – Second. All members were in favor. None opposed. None abstained. Motion was approved.***

**DISCUSSION**  
*(Dr. Cunningham/  
Mr. Davis, Chn.  
Harris)*

Despite lack of regulation, there is momentum in the Ohio health care environment toward Community Paramedicine. Therefore, the state of Ohio needs to respond. The biggest hurdle is changing the law in ORC and defining it in OAC, and identifying the process of changing it (seek law change vs. pieces in place – curriculum, continuing education, define who qualifies, funding, endorsement vs. certification, etc.).

Changes in language discussed: (1) Replace Emergency with NON emergency; (2) just take the word "emergency" out; or (3) Call it Mobile Integrated Healthcare (the new term for Community Paramedicine programs).

The anticipated timeframe to change the law and implement Community Paramedicine is 2+ years. Grants were also discussed as a possibility of opening the door to Community Paramedicine, but legal would need to approve.

***ACTION: Motion was made to recommend that the EMFTS Board immediately seek legislative changes to the ORC to allow for Community Paramedicine in Ohio. James Davis – First. Joshua Tilton – Second. All members were in favor. None opposed. None abstained. Motion was approved.***

**ACTION ITEM(S)**

**PERSON RESPONSIBLE**

**DEADLINE**

**DISCUSSION**  
*(Mr. Davis, Chn.  
Harris)*

The Committee identified stakeholders: Hospice, Home Health Care, ONA, OHA, Fire Chiefs, Ohio Association of EMS, Mental Health, Payor Groups (Insurance, Medicare, Medicaid), Council on Aging, Public Health (State, County, City), Respiratory Therapy, Occupational Therapy, Paramedic education programs/teaching institutions, Physician groups (OSMA - Primary Care, ACEP), APN's, PA's.

Community paramedicine is intended to fill in gaps and work in concert with existing services. It is not intended to take the place of or displace any current services.

Obtaining stakeholder feedback can be achieved through a 1<sup>st</sup> quarter stakeholders' meeting or by stakeholder participation/involvement with the Community Paramedicine Committee.

**DISCUSSION**  
*(Chn Harris)*

At the May 2013 EMS Board meeting, this Committee motioned the Board to approve that the Community Paramedicine Committee and Resource Committee work together to create and ultimately release a Request for Proposals. The RFP would utilize priority Five Funding during the 2014 grant period for community paramedicine research projects.

**ACTION ITEM(S)**

**PERSON RESPONSIBLE**

**DEADLINE**

Chn. Harris will discuss with the EMFT Board what projects may qualify under the RFP

Chn. Harris

December 17<sup>th</sup>  
Meeting

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***ACTION: Motion was made to adjourn. Pam Bradshaw – First. Josh Tilton – Second. All members were in favor. None opposed. None abstained. Motion was approved.***

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**ATTACHMENTS**

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- Travel reimbursement forms
  - Community Paramedicine – FD Implementation at UC Blue Ash on 9/27/13
  - Erich, John “How Minnesota Got Its Community Medics Paid” [www.emsworld.com](http://www.emsworld.com) May 1, 2013
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**NEXT MEETING**

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- The next scheduled meeting is December 17, 2013.
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