

AMBULANCE SERVICE ADVISORY BOARD

c/o Rhode Island Department of Health
3 Capitol Hill
Providence, RI 02908
(401) 222-2401

Meeting Minutes of the Ambulance Service Advisory Board June 19, 2013

ASAB Member Attendees:

Leo Kennedy
Raymond Medeiros
Thomas P. Caito
Michael DeMello
Dawn Lewis
Randall Watt
David Savastano
John Potvin
Al Galinelli
Lynne Palmisciano
James McDonald
Ana Novais
Jason Umbenhauer
Peter Grenier
John Vernancio
Michael McGrane
Shea Gregg
Brendan Martin

Representing:

Providence County Paid
Rhode Island State Assoc. of Firefighters
Washington County Volunteer
RI State Fire League
Hospital Association of RI
Newport County EMS
Rhode Island State Assoc. of Firefighters
Rhode Island State Assoc. of Firefighters
Bristol County EMS
American Academy of Pediatrics
HEALTH
HEALTH
Kent County EMS
RI Association of Fire Chiefs
Private Ambulance Service
Providence County Volunteer
American College of Surgeons
Private Ambulance Service

1. Establishment of a Quorum – 17 members present
2. Meeting was called to order at 1304hrs. by Leo Kennedy, Chairman.
3. Introduction of Membership
4. Review / Consent of Agenda - A motion by John Vernancio and seconded by Michael DeMello to approve the agenda was passed.
5. Approval of Minutes of the March 2013 meeting – A motion by John Vernancio seconded by Michael DeMello to approve the minutes was passed.
6. Correspondence – None
7. Announcements – EMS Pride Awards – Awards were presented by Jason Rhodes in Dr. Williams's absence. Dr. Selim Suner nominated members of the Bristol Fire Department for the resuscitation of a cardiac arrest patient. The patient suffered a STEMI and was

successfully resuscitated after receiving law enforcement CPR. The award recipients were: Michael Amaral, Jason Catano, William Austin, Lisa Heon, Joe Carbral, and Anthony Ferreira.

8. Committee Reports:

A. Educational Standards – Chairman Michael DeMello last meeting was held on May 28th with items to be discussed today under new business.

B. Pediatric Committee – Chairwoman Lynne Palmisciano name of the Committee has changed to differentiate the committee from the EMS-C grant. The pediatric EMS lecture series has been resurrected, please get the word out. The lectures will be held on the second Tuesday of the month.

C. Medical Affairs Committee – Lynne Palmisciano reported for Chairman John Pliakas that the committee has not met and there is one potential case.

D. Rules and Regulations Committee – Chairman Thomas Caito reported that the committee met on June 5th and is working on a comparison of the KKK ambulance spec to the NFPA 1917 ambulance spec. The committee is also working on the inter-facility protocol.

E. Legislative Committee - No Report – the committee did not meet.

F. EMS Dispatch Taskforce – No Report

G. Controlled Substances Working Group – No Report, as the issues still lie with the Department of Health Pharmacy Board.

H. Falls with the Elderly – There have been several meetings and a brochure is being developed for EMS providers to distribute. The Injury Prevention Team at HEALTH has taken the lead and is working on a training presentation for EMS.

I. Animals and EMS – Progress

J. EMS Culture for the Future – Jason Rhodes reported that he is awaiting National information and guidance. John Potvin, Michael DeMello, and Ana Novais agreed to sit on the committee.

9. Old Business

A. Burn Protocol Update – Dr. Shea Gregg discussed the protocol and stated that the clinical portions of the document have mostly been approved however Dr. Fine questioned the basis of the recommendations. Research has been conducted to review the volume of patients affected, national and local data and guideline recommendations. Dr. Gregg has prepared a 12 page support document that will be presented to Dr. Fine. Protocol may be released as soon as August 1, 2013.

At this time Chairman Kennedy informed the Board that Dr. Shea Gregg would be leaving the Board as he has taken a position in Connecticut. Chairman Kennedy thanked Dr. Gregg for his hard work on the Board.

- B. Review of the Protocols – Working with the Health Department the Board is looking to review all of the protocols with a completion date of June 2014.
- C. EMTC to AEMT approval (Educational Standards) – Chairman Michael DeMello read a report that represented 3 years of work and detailed the impact and changes of the impact of a transition of licensure level from EMTC to AEMT. Highlights of the report are as follows:
 - a. Field internship and clinical time would increase to meet the National Education Guidelines for EMS; overall course time would change minimally.
 - b. A transition will not diminish the level of service that communities currently receive. “All existing Cardiac providers at the time of the transition would be grandfathered.” Current Cardiac’s could remain licensed forever and would be lost only through attrition. This would ensure that service to the communities would not be diminished.
 - c. Clinical time is an issue that would need to be addressed as additional burden would be placed on hospitals. The recommendation would be to have a caveat to allow simulation training when actual practice cannot be accomplished. The Hospital Association would be asked to assist in facilitating agreements between programs and facilities.
 - d. Instructor / Coordinators would be allowed to instruct AEMT.
 - e. The AEMT would be required to maintain their National Registry certification which is already the case with EMT and Paramedic licensure levels.
 - f. Potential financial impact which would vary based on individual collective bargaining agreements and agency policies. The costs associated are: \$15.00 fee for National Registry certification, Recertification would be a 2 year cycle rather than 3 year, and the cost of the initial course will increase due to longer course length.

John Potvin made a motion to have discussion regarding the EMTC to AEMT transition, the motion was seconded by John Vernancio, the motion passed.

- a. Chairman Kennedy opened the floor to discussion and asked Jason Rhodes to speak about the position of the Health Department.
 - Chief Rhodes stated that Rhode Island strongly needs an increased clinical component, as many cities and towns often hire EMT Cardiac’s and place them directly into patient care despite the fact they have never touched a patient.
 - HEALTH is looking to streamline the licensure process, currently there are three levels of licensure with three different processes.
 - A transition would provide a validated testing procedure.
 - HEALTH is backing down from a more aggressive timeline to possibly July 2014 which would align nicely with the updated protocols.

- The Chief was 98% certain that current EMT-Cardiac's could challenge the AEMT exam.
 - A change in the recertification may not be needed for current Cardiacs which could stay 3 years. AEMT would also get a 3 year recertification however they would need to recertify with the National Registry every 2 years, much like we currently do with CPR certification.
- b. Jeff Howe expressed recertification concerns stating that the if AEMTs must recertify their National Registry every two years that AEMT and Cardiac licensure should both have two year recertification schedules.
 - c. Paul Valletta representing the Rhode Island State Association of Firefighters expressed concerns with the cost and the price of privatization of our licensure (National Registry).
 - Also worried about the number of personnel who will down grade their licensure from Cardiac to EMT, which will decrease the service to communities.
 - Concerned with the National Registry changing the standard, Jason informed Mr. Valletta that National Educational Standards, not the National Registry set the standard.
 - Also stated that he had concerns with the Director of Health not working with agencies and individuals that provide emergency medical services.
 - Concerned that a licensure change is not needed "EMT Cardiac's do a good job day in and day out. More letters after our name will not make us more professional."
 - d. Dan Beardsley Executive Director representing the Rhode Island League of Cities and Towns is looking strongly at the costs of this proposal. There is state law that an Administrative Fiscal Note must be prepared by the State Budget Office in conjunction with the Rhode Island League of Cites and Towns. "By law this is the only means to determine the fiscal impact of this proposal." Mr. Beardsley was disappointed that HEALTH and the Board reached out to many stakeholders but left out the League of Cites and Towns, mayors, town managers, and town administrators.
 - e. Al Galinelli stated that he was disappointed that after three years of hard work at the 11th hour the naysayers come forward.
 - f. Chief Michael Dillon of the Providence Fire Department explained that this proposal would have an adverse fiscal impact on City of Providence.

John Vernancio made a motion to send the issue of EMTC to AEMT transition to the Rules and Regulations Committee to have the hearings and discussions with the legal staff of the Health Department and invite stakeholders to discuss implementing the rules and regulations component of this proposal and to hold it for further study. The motion was seconded by Jason Umbenhauer, discussion ensued, and the motion was voted on and failed. Michael McGrane asked John Vernancio to withdraw his motion which was denied.

Thomas Caito made a motion to send the issue of EMTC to AEMT transition to the Department of Health to do the legwork regarding the legal aspects, financial aspects, impacts on cities and towns and to ensure that the meeting is open to public comment and evaluation. The proposal will then be brought back before the full Board. The motion was

seconded Mike McGrane. The motion was withdrawn by Thomas Caito and Michael McGrane.

Ray Medeiros made a motion to table the issue of EMTC to AEMT transition for further study to look at the whole impact of the proposal to include the fiscal, legal, and educational impact. The motion was seconded by Randall Watt; the motion was voted on and passed.

10. New Business

A. EMSC training sessions to be held on the second Tuesday of the month. Jason Rhodes introduced Carolina Roberts-Santana MD the new EMSC Program Manager.

B. Marisa Saccoccio gave an update on the ePCR program.

11. Good of the Order - None

12. Adjournment – John Potvin made a motion to adjourn, seconded by Randall Watt. The meeting adjourned at 1504 hrs.

Respectfully Submitted

John H. Potvin
Secretary