



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

GRETCHEN WHITMER
GOVERNOR

ROBERT GORDON
DIRECTOR

MICHIGAN EMS COORDINATION COMMITTEE MEETING

Friday, May 17, 2019

9:30 a.m.

Livingston County EMS
1911 Tooley Rd
Howell, MI 48855

MINUTES

Call to Order: The meeting was called to order at 9:34 a.m. by Dr. Edwards.

Attendance:

Present: A. Abbas (via phone); J. Boyd; D. Condino; K. Cummings; Dr. K.D. Edwards; Dr. M. Fill (via phone); G. Flynn; B. Forbush (via phone); W. Hart; B. Kincaid; C. Lake; S. Myers (via phone); M. Nye; D. Pratt (via phone); Lisa Martin for Scafidi; E. Smith; T. Sorensen; A. Sundberg (via phone); B. Trevithick; G. Wadaga; Dr. S. Wise; H. Rennie-Brown (via phone); A. Sledge; C. Tafoya (via phone).

Absent: Representative J. Yaroch; D. Fedewa; R. Dunne; F. Jalloul; L. Sincock; C. Baker

BETP Representatives: K. Wahl; W. Fales; S. Kerr; E. Bergquist; N. Babb; A. Brown; E. Worden; D. Flory (via phone); E. Hendy (via phone); K. Kuhl; J. Wagner; K. Ruest.

Guests: Chris Haney, Star EMS; Damon Obiden, WMRMCC; Carol Robinet, Superior Ambulance; Angela Madden, MAAS; Jonathan Hockman, Detroit Medical Centers; Lance Corey, Kent County EMS (via phone); Steve McGraw, Oakland County MCA; Erik Lyons, LCC; Marv Helmker, LCC; John Truba, Hayes Green Beach; Jason Hanifen, White Lake Township Fire; John Holland, White Lake Township Fire; Michael Mackey, Lansing Fire Department; Dave Boomer, Tri County MCA; Kevin St. Peter, Huron Valley-Saini Hospital.

Approval of Agenda: Motion to approve the agenda (Lake, Cummings). Motion carried.

Approval of Minutes: Motion to approve minutes from 3/15/2019 (Lake, Sorensen). Motion carried.

Introduction of Special Guests:

- Dr. Abir-EPOC Study Update
 - Dr. Abir gave an update presentation on the Enhancing Prehospital Outcomes for Cardiac Arrest (EPOC) study. This is a 4-year project. There is significant disparity in survival rates by area and the study is working to eliminating it. They are looking at a systems of care approach to identifying solutions and best

practices. She went over the preliminary findings from the site visits that have been done.

- Dispatch: She spoke about concerns identified in dispatch, such as chaotic scenarios and miscommunications. Dispatch-assisted CPR is critical and was emphasized on the visits that were done. Some barriers were identified.
- Law Enforcement: She said law enforcement is sometimes the first on the scene. Leveraging this to reduce time without chest compressions is key. She spoke about the relationships between fire, police and EMS and observations from the field. Training police in high quality CPR to administer before EMS arrives can help.
- Fire: She spoke about fire-based EMS in terms of relationships and advantages.
- EMS: Evidence based practice is important, and she went over other key factors, such as the role of leadership, time to scene and adequate staffing.
- Hospitals: Key points here are smooth EMS handoffs, sharing patient outcomes, and living in each other's shoes for the day (EMS and hospital staff job shadowing).
- The next steps are completing the site visits, conducting a statewide survey to agencies and developing the EPOC tool kit.
 - Questions: Bruce asked if there had been issues with bystander-initiated CPR. Dr. Abir addressed and spoke about the challenges with dispatch and chaos in the call. A public health campaign around administering CPR would be helpful. Another issue is people not letting police in when they get there first. Bill Hart asked if rural organizations were included and Dr. Abir said absolutely yes. Two of the site visits done were rural and another one is scheduled. Dr. Abir spoke briefly about these visits. Harriet Rennie-Brown asked how this study is related to [savemiheart](#). Dr. Abir said they are a primary partner with the study. Harriet asked about the PSAPs (911 centers) and would be interested in knowing more about the centers with pre-arrival difficulties, as training is funded for these through the State 911 office. Dr. Abir and Harriet will look at meeting on this. Greg Flynn asked if data is being collected about if the primary care provider is also the manager of the dispatch center or not and Dr. Abir addressed. Chris Lake asked when the data will start becoming available and

Dr. Abir addressed. The plan is to share findings at the EMSCC regularly. Dr. Abir's goal is to share the information as soon as she can and hopes to have something available by the end of the year. She will also be speaking at the MCA Conference in October.

- Aaron Brown-Systems of Care Update
 - Aaron gave a brief update on the work being done on Systems of Care and the recommendations that have been developed.
 - Ken asked if the slides could be shared with everyone. He also asked if this has been shared with stakeholders outside of EMS. Aaron addressed this and Eileen Worden said this was brought to the EMSCC because of the stakeholders, such as MHA. Eileen said this is open for discussion and what is being presented today are draft recommendations. Debbie Condino asked what is expected of the EMSCC moving forward. Eileen addressed and said the expectation is to share with the constituents and have comments by the end of June. Kathy Wahl said this can be posted to the website. Kathy also said this is contingent on funding. Ken suggested taking this presentation down to the regional level. Kathy said Aaron can present this at the regional level. Eileen reiterated these are just the recommendations and nothing can move forward without rules and statute. Eileen said these concepts and discussions are not new to the Michigan Health and Hospital Association. Eileen went over some of the history. Jeff Boyd commented about participation and concerns he has about providing a separate track. Resources are limited. Duplication was discussed. Dr. Fales agreed with Jeff Boyd and discussed these recommendations being well done. Dr. Fales asked about the Regional Trauma Network and if this remain under that umbrella. Eileen said the vision is yes, it will be a systems of care network. Dr. Fales also agreed with the difficulties Ken discussed. Dr. McGraw and Dr. Fales commented on stroke and STEMI identification.
 - The Sytems of Care recommendations can be found [here](#).
- Emily Bergquist-Biospatial Update
 - Emily gave an update on Biospatial for the group. The older data submission is almost at 100% so this is as close to real time as it can be. She went over new dashboards and showed how some of them work. Contact Emily at bergquiste@michigan.gov to request access (agencies and MCAS). Biospatial will be presenting at the MCA Conference in October. Biospatial has built stroke guidelines and will continue to develop things as needed. Biospatial helps to

narrow things down but it doesn't contain more specific information that can be obtained from Imagetrend.

Communications: Dr. Edwards wished everyone a Happy EMS Week.

Announcements:

Reminders of upcoming educational opportunities: None.

- These are going out in the Wednesday Updates from the Division of EMS and Trauma. Anyone needing to be added to the distribution list should email Nicole Babb at babbn@michigan.gov.

Old Business & Committee Reports:

EMS Systems/Strategic Planning Update – K. Wahl

- Kathy spoke about a suggested amendment to the Senate appropriations bill that would affect EMS. She read the language to the group: “The department shall not require a life support agency that does not charge for its services to submit data to the MIEMIS or any other QI plan.”
 - Kathy met with the Senator involved but nothing was resolved or changed. This could possibly affect 224 agencies. The intent was to only apply to volunteer services. Angela Madden from MAAS has also been made aware of this. Non-transporting agencies are at 76% compliance with reporting. The group discussed. This would usurp the authority of the Medical Directors. Kathy said it is in statute that they must submit data. Angela spoke to the workings of this being putting in boilerplate language. This would only apply to the fiscal year (though could be perpetually placed in the appropriation bills). This may be considered amending the Public Health Code by reference and may not be constitutional. The legislative services bureau at MDHHS will be looking at this. Greg Flynn asked about informing others. Angela said it was just added yesterday so there hasn't been time. Greg spoke to the importance of dissemination. Ken spoke to going backwards at a time when we have 76% of the agencies reporting. Kathy spoke to the implications that could come into play. She also discussed the free platform provided for documentation through the Division. Dr. Fales spoke to working on exploiting ways to make documentation easier for MFRs. The group will reach out to the

necessary parties so action can be taken. Dr. Edwards suggested someone preparing a brief and Dr. Fales suggested a resolution.

▪ **Motion to oppose the proposed language [relating to the EMS amendment] in the budget (Trevithick, Flynn). Approved.**

- Discussion: The provision for “does not charge” is very broad and could include ALS agencies. The group discussed how to proceed. Karla spoke to the history around this. This has been the local issue for 8 years and the way this is approached is important. Karla recommends getting the constituent lobbyist groups involved.
- Emily gave an update on the MCA Conference. It will be held on October 22nd and 23rd. There will be an MCA Orientation the night before on the 21st. Biospatial has agreed to do a training but the time has not been set yet.
- Emily and Krisy gave updates on Critical Care and Community Integrated Medicine that are recorded below in the committee reports section.
- Johnny gave an update on data. He reported the compliance numbers. Kathy sent out an email to the agencies that aren’t reporting, and Johnny has been getting calls for assistance. The letter that will go out to the CEOs for Hospital Hub has been drafted. This is expected to go out next week. Dr. Fales asked that the MCAs be copied. Improving the quality of data and creating a root cause analysis to show the gaps is being worked on. The goal is to show value. Bruce asked about the reporting of non-incidents and asked about Hospital Hub and asked about getting access. Johnny said we have to start getting signatures and then identifying who needs access and getting them online. Ken spoke about health data exchange and the work that is being done to incorporate the EMS and hospital data. This is a topic that should be looked at for presentation to the EMSCC. Debbie Condino led this initiative in the region. She spoke about it briefly. There is hesitancy from the hospitals, and they have spent time educating. They are going to develop a template to foster consistency. Not all the health systems are onboard yet. ESO is the vendor. Debbie volunteered to help facilitate this. Bruce said Johnny has been helpful.

Emergency Preparedness Update – Dr. Edwards

- Dr. Edwards spoke about ASPR funding and objectives. There will be financial penalties for not meeting objectives. Reporting timelines are compressed, as well.
- The CHEMPACK exchange is going around.

- The diazepam autoinjectors are being replaced with midazolam autoinjectors. He also spoke about shelf life extension.
- Mark I kits are in the old boxes but are filled with autoinjectors of pralidoxime chloride and atropine. They are making suggestions to the CDC for labeling adjustments.
- The SPRN conference will be on September 9th, 2019 at the Kellogg Hotel and Conference Center in East Lansing. Credits have been applied for.
 - There will be exercises in 2020.
 - Kenneth Onye is in the process of doing educational revisits. These are not evaluations.
- The Cyanokit cards were developed and sent out with the MI-MEDIC cards.

Trauma Systems Report – E. Worden

- There are 20 site visits left. In a couple of months, the first facility will be up for three-year cycle review.
- They hope to have strategic plan to STAC soon. They are also working on a system inventory to help the RPSROs on system performance.
- The RTN's applications are being looked at.
- Work continues on Systems of Care.

EMS Medical Director Report – Dr. Fales

- Dr. Fales gave a brief on air medical transport legislation. Three bills were passed and Dr. Fales briefly went over them. The PowerPoint presentation is attached to these minutes.

Committee Reports:

- Quality Assurance – Dr. Edwards
 - Dr. Edwards reported a canine transport protocol will be developed. This will be led by Dr. Wise. A protocol is being developed for Crashing Patients. Michelle Harper has resigned, and a letter will be sent to her. The next meeting will be held in June. The process for replacing Michelle has been started.
- Ambulance Operations – M. Nye
 - The committee has not met but Monty has received comments on the equipment list.
 - Portable electronic suction: This has been removed and this will be revisited.
 - Soft restraints: Cravats will be allowed.

- Sharps Container: This is for the areas that have protocols that would allow them to require the containers.
- Medical Control Authority – B. Trevithick
 - The conference is being planned and the committee has finished their portion of the rules. Bruce asked where the rule review process is. Kathy said there are a few danglers and we will try to get this out by the fall.
- Education – K. Wilkinson
 - Kathy reported that the refresher course hours were looked at in the last meeting, as the number of hours were higher than the CE hours required. The committee reviewed and made some adjustments.
- By-Laws – J. Boyd
 - The committee did not meet, but the bylaws draft is in process.
- Data Task Force – B. Kincaid
 - Bonnie thanked Emily for creating a helpful report on agencies reporting. Medical Control Authority representatives that would like access should contact Johnny Wagner at wagnerj4@michigan.gov.
 - Josh Legler is still working on the Data Quality Assessment report.
- Legislative – B. Trevithick
 - Bruce went over the items for the EMSCC to review.
 - HBs 4333 and 4344: These relate to healthcare activities in schools. The committee has not made any specific recommendations, but wanted the group to review.
 - SB 228: This develops a suicide prevention commission. The commission does not have an EMS representative. The recommendation is that EMS be represented on the commission.
 - **Motion to recommend an EMS representative serve on this commission (Trevithick, Sorensen). Approved.**
 - Discussion: Greg Flynn said this is a large commission and we would have to see how EMS can be added. Karla Ruest said this will be addressed by the MDHHS legislative division.
 - HB4327: This relates to assaults on health care professions. EMS is not included. A provision for EMS may have been included in another law. After discussion, EMS appears to already be included separately.
 - **Motion to support on behalf of the other professions (Trevithick, Sorensen) Approved.**
 - MCOLES: The committee was asked to review this at the last EMSCC meeting. The concept makes sense but there are complicating factors. It

was decided to create a joint meeting with the Legislative and Compliance and Licensing subcommittees.

- Opioid Overdose Bills (multiple): Bruce asked Kathy and Angela to address these bills. Kathy said there is a meeting scheduled for next week to figure out what is happening with these bills. Jeff Boyd wondered if we need to create an opioid related subcommittee. Kathy said MDHHS is trying to work on this. Bruce said the intentions are good, but the complications are not understood. Bruce asked if there is a way to create an expectation for legislators to consult the experts before this type of legislation.
- Rural – G. Wadaga
 - The next meeting is Tuesday, May 21st.
 - Senator Stabenow’s office has indicated the SIREN funds have been appropriated.
 - The Rural White paper is in the final draft and will be going to Kathy soon.
 - The non 24/7 bill is close to being passed.
- Pediatric Emergency Medicine – K. Wahl
 - Michelle Ash had her baby earlier this week. Kathy said the EMS office will try to keep things going in her absence. The Pediatrics Conference is June 18th and the MI-MEDIC cards have been mailed out.
- EMS Safety Ad Hoc – C. Lake
 - The committee met twice. They worked on the presentation for the EMS Expo. The panel did a great job and Chris thanked everyone. They are moving forward with the survey results. He spoke about recent safety concerns in the field. The next meeting is June 13th.
- Critical Care Ad Hoc – E. Bergquist
 - The workgroup is moving forward on what personnel licensure would look like for critical care and they hope to present to the EMSCC in September. Ken asked about the billing roundtable follow up. The Doodle poll is still being completed and a final date needs to be chosen.
- Community Integrated Paramedicine Workgroup – K. Kuhl
 - The workgroup is on the same trajectory as Critical Care for the licensure language and they also hope to present to the EMSCC in September. The CIP support grants are open and will close on May 31st. She spoke about education for CIP and will be sending out invitations to those programs that may be interested in delivering a CIP program. June 25th is the date for the CIP Initial Education Conference. Johnny spoke about the trackable metrics that are being developed.

New Business: None.

Membership Round Table Report:

- Chris Lake introduced the new Tri County operations manager, Dave Boomer.
- **Motion to cancel the July meeting (Trevithick, Kincaid). Approved.**
- Kathy said biospatial has been introduced to Alicia Sledge from the Office of Highway Safety Planning to help facilitate the incorporation of the traffic records.
- Dr. Edwards spoke about the next meeting being held in Marquette and briefly discussed the upcoming move for the hospital.

Public Comment: None

Adjournment: The meeting was adjourned at 12:04 (Lake, Kincaid). Approved.

NEXT MEETING: *September 27th, 2019 in Marquette.*