

EMSCC AMBULANCE OPS AND LEGISLATIVE SUBCOMMITTEES

MINUTES

June 05, 2024

10 a.m. – 12 p.m.

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248-509-0316 Access Code: 318 269 880#

Committee Members:

AMBULANCE OPS: Monty Nye – chair, Aaron Sogge, Bill Forbush, Brandon Whipple, Eric Snidersich, Dustin Hawley, Jason Bestard, Ralph Ortiz, Tim Niggemeyer, Angela Madden.

LEGISLATIVE: Bruce Trevithick – chair, Monty Nye, Greg Flynn, Ken Cummings, Lance Corey, Bob Miljan, Alyson Sundberg, Angela Madden.

Absent: Jeff White, Kraig Dodge, Curtis LeSage, Dr. Brent, Paul Hood, Lauren LaPine, Jonathan Pyka.

Guests: Kelsey Ostergren, Brian Scribner, Christopher Stoecklein, Gary Proctor, Jason MacDonald, Matt Biskner, Michael McLeieer, Nate Potter, Rob Warnemuende, Carol Robinet, Tim Miner.

Bureau Staff: Babb, Baker, Kerr, Bergquist, Forbush, Frascone, Dr. Fales.

The meeting started at 10:07 a.m. It was decided to run these meetings as work groups.

To Note:

- The comment period was extended until July 22.
- Very few participants have read the entire 608 pages.
- Derek Flory summarized the following:
 - There are definitions of who it affects.
 - All life support agencies and fire departments in the state.
 - It goes into the background of why the old Fire Brigade rules need updated.
 - It goes into paragraph by paragraph what the requirements are.
- The overview videos sent out were discussed. It was decided not to watch any of the videos during the meeting time.
- What the product of these meetings should be was discussed. The feedback will be based on the following OSHA document, however, this document is only the specific questions they are asking and does not address the whole rule set: [QUESTIONS AND ISSUES COMPILED FROM THE EMERGENCY RESPONSE NOTICE OF PROPOSED RULEMAKING](#).
- Michigan is a state that with an OSHA-approved State Plan so items that reference not having an OSHA-approved State Plan do not require comment. MIOSHA is the State-approved plan.
- Federal Register (page 7774 to 8023) being referenced in these minutes is located [here](#).
- Tim Miner shared the American Ambulance Association [video](#) on how these rules are expected to impact EMS.

Scope:

A-1: The state office does not collect this data. Greg Flynn said OSHA is looking to define a volunteer and what substantial benefits are because they want to know what the impact is, because a

true volunteer isn't going to be covered under this and they are trying to define what a true volunteer is. Ralph Ortiz and Emily Bergquist said they understand this the same way. Tim Miner spoke, he advised he has already provided comments through the American Ambulance Association, and he thinks what we need to walk out with is a product that addresses their specific value targets to give an economic picture, an operational picture, and provide why with references. There are some true volunteer agencies in Michigan, but the state office does not collect data on what they receive. There may be compensation we don't know about. No one at the table today has perspective on this piece. Greg Flynn said part of this is to inform the stakeholder groups the sky is not falling with this and there is no change to you if you are already excluded under volunteer status. Angela Madden stated her research indicates they quantify volunteers not as if they receive compensation, but based on whether or not they are employees. Greg Flynn stated they go over this on **page 7799** that defines these. He said we could probably move to A-5.

A-2: Skip.

A-3: Skip.

A-4: Skip.

A-5: The group discussed. There are other organizations that do this type of work. At what point is the operation no longer considered a rescue operation? Tim Miner discussed Public Act 390. He doesn't think this is specifically for EMS particularly, but other organizations that may interact should look at this. This is a moot point for EMSCC purposes. Greg Flynn said the focus is on how the agency defines the role.

- **Comment: There may be a need for this, but it should be separate from EMS.**

A-6: Skip.

Definitions:

B-1: The definition of Workplace Emergency Response Employers (WEREs) is on **page 7809**. There are licensed agencies that meet this definition. Living quarters/areas were discussed. MDHHS does not inspect living quarters, MIOSHA does.

- **Comment: Agencies that are affected by this should provide comment.**
- **List of WEREs licensed as agencies:**
 - ALTICOR INC
 - BILLERUD NORTH AMERICA
 - CLEVELAND CLIFFS CORPORATION
 - DOW CHEMICAL COMPANY
 - HEMLOCK SEMICONDUCTOR OPERATIONS LLC
 - UNITED STATES STEEL CORPORATION

Emergency Response Program (ERP) Development:

E-1: The group discussed how to address. Tim Miner said involving employee involvement is a good thing, as it involves them in their own safety. This is also a requirement to allow them, not mandate them to participate.

- **Comment: Yes, we believe employee participation will result in a better ERP.**

Risk Management:

F-1: [NFPA 1500](#) is referenced. Greg Flynn said there is nothing here that concerns him as an

employer. Tim Miner discussed and said it's pretty benign. Bruce Trevithick said they are looking for additional items. He also advised this is in the new [CAAS](#) standards. Greg Flynn read from the definition. A lot of the things in these rules is administrative. Alyson Sundberg said a lot of agencies are already doing this and she doesn't see a problem with it. It sounds more difficult than it really is.

- **Comment: There is no need to add other subjects because the phrasing of “reasonably anticipated” covers these instances.**

F-2: Tim Miner discussed an example of needle sticks and what is required for those. It was done throughout COVID. This is more of an administrative burden. Exposures are forcing you to do a performance program that shows improvements. Greg Flynn discussed **page 7814** where there is an EMS example. He said this sounds more SOG/policy and procedure and not broad plan.

- **No comment.**

Medical Screening and Surveillance:

Discussion: Detail on this is provided on **page 7815**. The group discussed. Bruce Trevithick asked if this could be too restrictive. Alyson Sundberg advised she thinks this section is overreaching for OSHA. Tim Miner agreed. He said AAA got a lot of comment on cost analysis. It's extraordinary cost just for his organization alone. He said he struggles with this entire section. G-1 doesn't appear to be beneficial to organizations, and comes with great financial, administrative, and operational burdens. G-2 cross applies a fire standard that is specific to fire to other types of responders. Greg Flynn spoke about exposures from **page 7819**. He doesn't find a line that excludes EMS. Bruce Trevithick asked if there would be instances where EMS personnel acting as EMS would exceed the exposure threshold. Greg Flynn thinks the answer is yes. Alyson Sundberg asked if there was a way for this to be more refined, as it does apply to fire. The group discussed how these might apply. Greg Flynn read from **page 7815** and said it says they aren't telling agencies exactly what to do, but they need to be doing something to determine functional fitness. The assessment should match the role. Organizations have to demonstrate they are ensuring responders are capable to do the duties without causing harm to themselves and others. He said he's been hearing for a decade now that we want this. He recognized there is cost associated. Tim Miner said the premise is noble, but the “how” is blurry. Brandon Whipple said maybe we are digging into this too deeply. He spoke about surveillance and [NFPA 1582](#) as far as G-2. Greg Flynn said he wouldn't advise MAFC to be against this. Ralph Ortiz agreed that agencies should be doing something. Dr. Fales said this is applicable for firefighter, not necessarily to EMS, though. Greg Flynn said we can ask for clarity in the comments, or propose language that provides clarity if we would like exclusions or more of a tiered system. Tim Miner concurred and discussed. What elements should be included in an evaluation for a sole EMS provider were discussed. Screenings and medical questionnaires were discussed, as well as adding policy language regarding the ability to recognize when someone is struggling and being checked on. This will impact EMS and Greg Flynn discussed. Incident command, trainings, and continuation education are indicated. Greg Flynn said many agencies are covering most of this. Greg Flynn mentioned as a note that this does get into fire officer requirements for the fire people.

- The group decided to come back to this section tomorrow.

Training:

H-1: No comment.

Facilities:

I-1: Agencies affected should provide comment.

J-1: No comment.

J-2: Comment: Agreed.

Personal Protective Equipment: No comment on this section. It is mostly related to fire.

Vehicles:

L-1: Greg Flynn spoke about the type of vehicles they are speaking of. Alyson Sundberg spoke about snowmobile response. There are other pieces of equipment required. She spoke about overreaching to put this into the rules. Dr. Fales spoke about providers not wearing restraints in the back of the ambulance. **Pages 7830 and 7831** contain more information. We would support use of seatbelts in vehicles that have them. Medical Responders responding in personal vehicles was discussed. This is covered on **page 7832**.

- **No comment on this.**

L-2: Covered on page 7831.

- **Comment: Responders would begin donning prior to leaving and completion of donning would happen on scene.**

L-3: Infants were briefly discussed.

- **Comment: Absolutely yes, patients should be restrained in the back of the ambulance.**

Incident Management:

O-1: Comment: There are no issues with being compatible with NIMS.

O-2: No comment.

Emergency Incident Operations:

P-1: No comment. We should already be doing this.

Standard Operating Procedures:

Q-1: Bruce Trevithick asked if there are parameters for workplace violence? Alyson Sundberg said at the hospital now this is mandatory and discussed. She thinks there just needs to be something in place. She doesn't think this is inappropriate for these rules. Tim Miner said this should be in your risk assessment.

- **Comment: We would support having requirements. This could be covered in Risk Assessment and SOP sections.**

Final thoughts for 06/05/2024: Tim Miner recommended everyone to read the section on initial regulatory flexibility analysis, as that impacts to everything discussed today based on populations of less than 50,000. This is in the document reviewed today and is a feasibility ask.

Meeting ended at 12:04 p.m.

Next meeting: June 6 at 8:00 a.m.