The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

67 Forest Street Marlborough, MA 01752



CHARLES D. BAKER

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Secretary

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**Tel: 617-624-6000**

**www.mass.gov/dph**

**Massachusetts Department of Public Health**

**Minutes of the Emergency Medical Care Advisory Board**

**Meeting of Wednesday, April 24, 2019**

Massachusetts Emergency Management Agency (MEMA) Operations Room

400 Worcester Road, Framingham, MA

**Date of Meeting:** **Wednesday, April 24, 2019**

**Beginning Time:** 10:02 AM

**Ending Time:** 11:42 AM

**Committee Members Present:** The following appointed members of the **Emergency Medical Care Advisory Board (EMCAB)** attended on April 24, 2019, establishing the required simple majority quorum pursuant to Massachusetts Open Meeting Law (OML): Elizabeth Kelley (Chair); Jonathan Brickett; Andrew Old; Peter Ostroskey; Ezra Reinstein; Kathleen Shubitowski; James Slattery; Bryan Urato; Joseph Tennyson; Joseph Maruca; Alex Walker; Jan Mutchler; Anuj Goel; Erin Deveney; Gary Huntress; Peter Burke; Monna Wallace; Wook Beltran; Thomas Henderson; Chris Norris; David Faunce; Derrick Congdon; Edward McNamara; Deborah Clapp; Brook Chipman; Sean Tyler; Paul Brennan; Mark Miller; Jon Burstein.

1. **Routine Items**

Ms. Kelley called the meeting to order at 10:02 AM. Ms. Kelley introduced herself and thanked everyone for attending. Ms. Kelley requested a motion to approve minutes from the October 17, 2018 meeting. There was a motion to approve the minutes, a second motion to approve and the minutes were approved by the EMCAB members.

Ms. Kelley introduced Mark Miller to provide OEMS updates. He announced that the OEMS, along with the Bureau of Health Care Safety and Quality, will be moving to a new location at 67 Forest Street, Marlborough. Mr. Miller gave an update on annual recertification.

Mr. Miller introduced Dr. Jon Burstein to provide an update on the 2019 Statewide Treatment Protocols. Dr. Burstein announced that the 2019 Statewide Treatment Protocols were issued last week and will be mandatory as of June 17, 2019.

II**. EMCAB Standing Committees**

Ms. Kelley reminded the EMCAB members that at the last meeting the Committee voted on chairs for two standing EMCAB subcommittees: Deborah Clapp as chair of the Workforce Training Committee and Jonathan Brickett as chair of the Mass Casualty Incident Response Committee.

Ms. Kelley announced that today EMCAB members will vote on the membership of these two subcommittees. Ms. Kelley requested a motion to approve the members of the Workforce Training Subcommittee. There was a motion to approve the committee membership, a second motion to approve and the membership was approved by the EMCAB members.

Ms. Kelley announced that today EMCAB members will vote on the membership of these two subcommittees. Ms. Kelley requested a motion to approve the members of the Mass Casualty Incident Response Committee. There was a motion to approve the committee membership, a second motion to approve and the membership was approved by the EMCAB members.

III. **EMR/EMT Fallon Special Project Waiver**

Ms. Kelley announced EMCAB would now turn to the special project waiver application submitted by Transformative Healthcare, LLC/Fallon Ambulance Service. Ms. Kelley states that the applicant will have an opportunity to present its application for a special project waiver to EMCAB. EMCAB members will then have an opportunity to ask questions to the applicant. There will then be a brief public comment period, followed by additional time for EMCAB member discussion. EMCAB members will then vote on a recommendation to the Department.

Mr. Gregory Davis and Ms. Danielle Thomas from Transformative Healthcare, LLC/Fallon Ambulance presented the special project waiver application, the alternative BLS staffing model which is being proposed as a pilot program due to staffing difficulties.

After the presentation, Ms. Kelley stated that EMCAB members will now have a question and answer session.

Kathy Shubitowski asked for clarification about final transport destination.

Mr. Davis stated anything going to an emergency room would not apply in this special project waiver.

Wook Beltran asked about the configuration of an ambulance and whether this project would be allowable under the regulations.

Mr. Miller stated that the regulations do require an EMT and EMT configuration currently and the regulations would need to be changed or a waiver would need to be issued.

Mr. Miller asked about if Transformative Healthcare/Fallon Ambulance currently use a mentor program for EMTs.

The answer was yes, the company does have a current mentoring program.

Joseph Maruca asked why Transformative Healthcare/Fallon Ambulance does not recruit and hire new employees and train them as EMTs.

Ms. Thomas stated that they currently do that. Some other factors prevent some individuals from entering the industry at the EMT level and the company is looking for growth and career opportunities.

Wook Beltran asked if, from a regulatory standpoint, there was any current oversight of EMRs.

Mr. Miller stated there is not an EMR process in certification. The EMR level would need to be recognized in the regulation and then set up the certification process.

Mr. Davis said that they see this proposal as a special project because the EMR level is not recognized in Massachusetts.

Mr. Davis asked Mr. Miller if anything further would need to be done for this special project, given that the EMR level is not currently recognized.

Mr. Miller said that OEMS would need to figure out how to handle the EMR certification requirements for this special project waiver.

Paul Brennan stated that most delays are inherent to the processes currently in place in the hospitals. We need to look at the processes that slow down the discharge process and the end result is falling on EMS. Mr. Brennan asked what times do you see that you have delays that are 2 hours or more?

Mr. Davis stated that they are seeing delays in the afternoons and working on changing processes at multiple levels in hospitals, plus seeing a decrease in the amount of staffing.

Deborah Clapp agreed with Mr. Brennan’s comments. Ms. Clapp stated she has great concerns about how EMR would be introduced in Massachusetts with this special project waiver and stated EMR should be examined to see if it is a good fit for Massachusetts. This should start with discussion at the Workforce Training Committee.

Ms. Thomas explained in more detail the EMR training under the special project waiver.

Jonathan Brickett asked for clarification from Mr. Miller if this would need to be vetted through the regulation process.

Mr. Miller stated that OEMS would need to figure out next steps such as oversight and clinical issues.

Ms. Kelley stated that there would need to be issues addressed from a legal perspective as there is no explicit pathway forward at the moment.

Mr. Davis stated that they are looking at it as a special project without changing regulations. It is a pilot program and they are open to language that the Department would like to add to the special project.

Peter Burke asked what guarantees are there that this will not become the standard for all EMS transport and how to address concerns about patient safety?

Mr. Davis stated that it would be used for the lowest acuity patients and the EMT would be on board with the patient at all times, and the EMR would be driving the ambulance and assist as necessary.

Bryan Urato asked if the special project waiver is approved, is it being created without an EMS certification level or would it be going through the state?

Mr. Davis stated they would be going through the National Registry to make sure EMRs are certified and trained.

Tom Henderson stated that EMR is not recognized by regulation. Stakeholders in EMS needs to sit down and review. The states that have EMR have regulations and minimum requirements. National scope of practice is seeing a move to EMTs and away from EMRs on ambulances. We should look at a statutory platform and then move to a regulatory platform.

Ms. Thomas stated that there is a difference in the national scope and what is being proposed here which is to limit the scope to lowest acuity patients and non-emergent calls.

Ezra Reinstein suggested it may be more appropriate to consider this proposal through the regulatory revision process. Mr. Reinstein asked about the length of the special project waiver and asked if there should be an earlier end date if the unemployment rate increases, the number of EMTs increases or if there are problematic results?

Ms. Thomas stated that the ultimate goal would be to staff with the traditional EMT and EMT model. The two-year mark is in line with other similar special projects.

Mr. Davis stated that they have tried everything to get more EMTS to work in their services. If we don’t pilot this, patients will be waiting even longer.

Mr. Reinstein asked if there is a reason as to why there should not be a self-executed end based on labor market or available EMTs?

Ms. Thomas stated that they are not opposed to that necessarily but want to continue on with career growth this could create.

Ms. Kelley stated that she would like to move onto the public comment and asked if there were any more questions for the presenters. There will be additional time for the EMCAB members to discuss.

Ms. Kelley stated that at this time, we will move to the public comment section.

Dr. David Schoenfeld provided

Ms. Kelley stated we will now move to the committee discussion time and then to the vote.

Jonathan Brickett stated he was concerned about this issue. There are multiple issues involved with this special project – a business model and a hospital issue.

Deborah Clapp commented that getting patients out of a hospital is getting worse and encouraged hospitals to reach out to work with EMS agencies around mobile integrated health.

Peter Burke stated that we must focus on patient safety. If EMR and EMT is allowed, it will become the new standard which may not be good for patient safety.

Paul Brennan stated that in his specific area there is not an EMT shortage, it is a paramedic shortage and timing shortage. We need to fix the problems that cause the delays.

Deborah Clapp asked about any letters or comments received by the Department and whether the letters were supportive or opposed to the special project waiver.

Mr. Miller stated Region 1 submitted a letter as well as another association.

Thomas Henderson stated PFFM submitted a letter to the Department strongly opposing the waiver and discussed the options of looking at this in the future through the regulatory and statutory platform.

Chris Norris stated that the Fire Chiefs Association of Massachusetts submitted a letter to the Department opposing the waiver.

Ms. Kelley asked if there were any additional comments from the EMCAB.

Ms. Kelley stated that the purpose of the motion is a to recommend to the Department the approval of the application of the special project waiver. There was a motion to recommend to the Department the approval of the application of the special project waiver: 5 members voted in favor; 20 members voted opposed; and 5 members abstained.

Ms. Kelley stated the motion does not pass.

Ms. Kelley stated that there were no additional agenda items and thanked all of the members. The next meeting is scheduled for October 16, 2019.

Ms. Kelley asked for a motion to adjourn the meeting. There was a motion to adjourn, a second motion to adjourn and the meeting adjourned at 11:42am.