DEPARTMENT OF HEALTH SERVICES STATE OF WISCONSIN

F-01922 (11/2017)

OPEN MEETING MINUTES

Instructions: F-01922A

Name of Governmental Body: State EMS Board			Attending: Separate list compiled by DHS EMS Section.
Date: 3/6/2019	Time Started: 9:02am	Time Ended: 12:38pm	
Location: 1313 John Q Hammons Drive, Madison, WI 53562			Presiding Officer: Biggart, Jerry (EMS Board Chair)
Manufacture 1			

Minutes

- 1. Welcome and committee member check-in. Meeting called to order at 9:02am.
- 2. Introductions of EMS Board, EMS Office staff, and attendees.
- 3. Approval of minutes from December 4, 2018 and December 5, 2018. No discussion. Motion to approve minutes by Don Kimlicka, second by Dustin Ridings. All in favor, none opposed.
- 4. EMS Section Chief Lockhart provided updates on a number of current projects. Please see outline below.
 - a. Act 66 (Community EMS)
 - i. working group has agreed on a recommendation regarding medical direction and curriculum. Both of those recommendations will be sent to the appropriate board committees prior to the June meeting for their review and discussion.
 - ii. group has reviewed the ImageTrend reporting module
 - iii. next step is to craft the specifics for rule further work is on hold pending approval of the administrative rulemaking process.
 - b. Act 97 (Flexible Staffing)
 - i. Section staff have been working on the details of implementation for this project.
 - ii. List of items that services wanting to participate need to consider.
 - iii. Further work is on hold pending approval of the administrative rulemaking process.
 - c. Act 296 (Telecommunicator CPR)
 - i. Laurie Borgers joined the EMS Section in February as the 0.5 FTE to coordinate this program.
 - ii. Working group has continued to meet and in conjunction with a grant-funded project under the leadership of the Wisconsin EMS Association and the Medical College of Wisconsin, have made progress on implementation of this program.
 - iii. A funding award program was announced last Friday for public safety answering points and dispatch centers which will allow them to implement or improve T-CPR programs. That funding award program is the result of the one-time \$250k state appropriation.
 - d. Act 350 (Three-year Licensure Period)
 - i. Work on the logistics for implementing Act 350 for the 2020 renewal cycle is underway.
 - ii. All currently licensed practitioners will renew in 2020 under the current requirements.
 - iii. The EMS Board's Education and Training Committee has been asked to review current requirements and what, if any, changes would be needed for the change to a three-year period. No decisions have been made at this time and the discussions are on-going.
 - e. Administrative Rulemaking
 - i. Section staff filed the necessary paperwork with the Department of Health Services Office of Legal Counsel for changes to 110 that are needed based on the various legislative acts described above.
 - ii. The paperwork is going through the internal department process that ultimately requires the approval of Governor Evers.
 - iii. Once we have received approval to begin the rulemaking process, we have been told we may proceed with limited pilot programs for both flexible staffing and community EMS.
 - iv. We will use these pilot programs and their experiences to guide us in the rulemaking process. From the date of approval, the Department

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has 30 months to complete the rulemaking process. That process is completed typically within 12-24 months.

- v. We will be bringing issues for discussion back to the Board during the process.
- f. Funding Assistance Program
 - i. Work has been completed on a review of the program
 - ii. Issues have been identified for improvement including the formula
 - iii. On the agenda as a separate item for additional information
- g. ImageTrend
 - i. Work is continuing on the updates and changes to the applications
 - ii. Office of Legal Counsel is reviewing proposed changes
 - iii. Platform upgrade is complete it has resulted in some additional challenges with the current applications such as the Local Credentialing Agreement. We have resolved several of the issues, others will have to wait for the applications to be revised.
- h. Survey
 - i. Survey sent out to all 18,000 licensed practitioners last fall
 - ii. Received 1,300 responses
 - 1. Primary areas of concern identified:
 - a. Timeliness of response
 - b. Get More Staff
 - c. Better Customer Service
 - d. Better/More/Transparent communication
 - iii. 1, 3, and 4 can be addressed directly by staff, 2 is a bit more difficult
 - iv. Will be basis for a QI project for the section for 2019 and work is already underway on that
- i. State Health Assessment
 - i. DPH is in the process of beginning the statewide health assessment for 2020-2025 and that will include a survey of our partners.
 - ii. I will be sending you a link to a 10-15 minute survey we encourage you to participate and complete the survey when you receive it.
- j. Statewide EMS Communications Plan
 - i. The statewide EMS communications plan underwent review and some minor revisions last year.
 - ii. Changes include updates to
 - 1. Air medical and mutual aid communication and coordination
 - 2. Healthcare Emergency Readiness Coalition Regional Contact Information
 - 3. Hospital list
 - 4. Recommendation of P25 compliance when purchasing equipment
 - 5. Inclusion of ESINet, FirstNet, NextGen 911
 - iii. Revised plan is available on the website.
- 5. Update from System Quality and Data Committee Chair Carrie Meier
 - a. See System Quality and Data meeting minutes for details
 - b. HERCs will help spread message regarding stroke care changes in conjunction with Coverdell
 - c. 2/3 of cardiac arrest cases in 2018 did not receive any CPR or AED, which emphasizes the importance of pre-arrival instructions
 - i. 11,800 cardiac arrests in Wisconsin in 2018
 - ii. 28,000 chest pain calls in 2018 54% had no EKG or 12-lead obtained 73% did not receive aspirin
 - d. CMS looking for ways to incentivize participation in CARES registry

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- 6. Update from EMS for Children Chair Dr. Kim
 - a. See EMSC minutes for more details
 - b. Goal of 30% of EMS services having a pediatric emergency care coordinator (PECC) by 2020; 60% by 2023; 90% by 2026
 - c. Agencies have not embraced the idea of assigning a PECC, but that is likely due to lack of information
 - d. PECC information can possibly be added to future online Operational Plan submission process
 - e. EMSC applying for a grant to improve pediatric care in community hospitals
 - f. EMSC will work on suggestions for pediatric continuing education to be considered for license renewal requirements
- 7. Update from Education and Training Committee Chair Greg West
 - a. See Education and Training Committee minutes for more details
 - b. EMS Office is working to increase the number of NREMT evaluators at the ALS level in Wisconsin
 - i. Committee encourages this as it can be difficult to schedule ALS NREMT evaluations
 - ii. Examiners from surroundings states have been brought in to help in the meantime
 - c. Report to board, with possible action, to reconcile continuing education requirements with new three-year license period
 - i. Proposal is to adopt the NREMT NCCP model, which requires minimum hours over three years
 - 1. EMT goes from 30 hours over two years currently to 36 hours over three years
 - 2. AEMT is 50 hours over three years
 - 3. Paramedic is 60 hours over three years
 - ii. Education and Training Committee make a motion to recommend adoption of the NREMT NCCP guidelines
 - 1. Discussion related to pros and cons of this model
 - 2. Motion carries with one opposed
 - iii. Second motion to keep Critical Care hours at 24 hours over three years
 - 1. All in favor, none opposed; motion carries
- 8. Update from Physician's Advisory Committee by Chair Dr. Zils
 - a. See PAC minutes for more details
 - b. No action items for Board at this time
- 9. Update from System Management and Development Committee Chair Dr. Clark
 - a. See System Management and Development minutes for details
 - b. No action items for Board at this time
- 10. Legislative update from Chair Biggart
 - a. Two bills proposed for volunteer incentives
 - b. Governor Evers' proposed budget moves the Office of Emergency Communications from DMA to DOT
 - c. Budget also proposes 2% increase for levy limits and shared services
 - d. Proposed levy limit increases for joint public safety dispatch centers
- 11. Update from Chief Bantes on how the state may be able to help with recruitment and retention
 - a. Motion by Chair Biggart to create a Recruitment and Retention subcommittee of the Systems Management and Development Committee
 - i. Second by Dr. Clark; discussion including asking PFFW, WEMSA, PAAW to join
 - ii. All in favor, motion carries
- 12. Update on Funding Assistance Program by EMS Section Chief Lockhart
- 13. Update on hospital diversions by Board Chair Biggart
- 14. Update on Pre-Arrival Instructions and PSAPs nothing new to report

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- 15. Update from EMS Section on First Aid scope of practice will be included in DHS110 revision
- 16. Trauma/STEMI/Stroke Center position statements are in progress
- 17. All stakeholder groups continue to work with DHS agencies and legislature to increase Medicaid reimbursement rates for EMS
- 18. PFFW presented on provider health and wellness at recent State EMS Instructor meeting
- 19. EMS Section has some CQI policy samples that will be made available to services that do not have their own CQI plan
- 20. Systems Management and Development Committee will review the policies required by DHS
- 21. Meeting adjourned at 12:38pm.

Prepared by: Anderson, Christopher on 5/17/2019.

These minutes were approved by the EMS Board on: 9/4/2019